

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2018 OF THE CONDITION AND AFFAIRS OF THE

Michigan Complete Health, Inc.

Organized under the Laws o)			
organized ander the zawe e	f Mich	nigan	, State of Domicile	e or Port of Entry	Michigan
Country of Domicile			United States		
icensed as business type:	Life, Accident & Health [Dental Service Corporation Other []			Hospital, Medical & Der Health Maintenance Or Is HMO Federally Quali	
ncorporated/Organized		Comme	nced Business		7/15/2005
Statutory Home Office	800 Tower	Rd., Suite 200		Troy, MI, U	JS 48098
•	(Street a	and Number)	·	(City or Town, State, Co	ountry and Zip Code)
Main Administrative Office			Saint Louis	, MO, US 63105	314-725-4477
	(Street and Numb				(Area Code) (Telephone Number)
Mail Address	7700 Forsyth Boulev	/ard	_ ,	Saint Louis, MO, U (City or Town, State, Country	S 63105
Onimana I a antion of Dooles on	•	. Box)	Caintl	(City or Town, State, Country	and Zip Code)
Primary Location of Books ar		Street and Number)	City or Town	ouis, MO, US 63105	
nternet Web Site Address	(0	,	www.michigancomple	• • •	(Area Code) (Telephone Number)
-	T M	·	ww.michigancomple		477
Statutory Statement Contact		rie Ferguson lame)	 -	314-725-4 (Area Code) (Telephone N	
tafero	uson@centene.com	iame)		314-725-4658	umber) (Extension)
	(E-Mail Address)			(FAX Number)	
		OFFIC	FRS		
Name	т	itle	Nam	0	Title
Amy Williams		sident	Keith Harvey	Williamson,	Secretary
Christopher Isaak	,rea	asurer		,	
Tricia Lynn Dinkelmar	Note Presi	OTHER O			
Amy Williams		IRECTORS O	R TRUSTEES Daryl P		
State of	Missouri	ss ss and say that they are erty of the said reporting planations therein contains the reporting period stand Instructions and Accords in reporting not related his attestation by the de	e the described officers entity, free and clear from the dabove, and of its incurrent practices and Produced to accounting practice scribed officers also inconstitutions.	of said reporting entity, and om any liens or claims thereoed to, is a full and true stater come and deductions therefrocedures manual except to es and procedures, according cludes the related corresponded	that on the reporting period stated, n, except as herein stated, and tha ment of all the assets and liabilities from for the period ended, and have the extent that: (1) state law may go the best of their information ding electronic filing with the NAIC filing may be requested by various
State of	Missouri	ss ss and say that they are erty of the said reporting planations therein contains the reporting period stand Instructions and Accords in reporting not related his attestation by the de	e the described officers entity, free and clear from the described of the ined, annexed or referred above, and of its incurting Practices and Production of the enclosed of th	of said reporting entity, and om any liens or claims thereo ed to, is a full and true stere come and deductions therefrocedures manual except to es and procedures, accordireludes the related correspond statement. The electronic	n, except as herein stated, and that ment of all the assets and liabilities om for the period ended, and have the extent that: (1) state law may no to the best of their information ding electronic filing with the NAIC
State of	Missouri	ss se and say that they are erty of the said reporting planations therein contain the reporting period stand Instructions and According to the reporting not related his attestation by the deerences due to electron Keith Harvey	e the described officers entity, free and clear from the described or referred above, and of its incurting Practices and Produced officers also incide filing) of the enclosed Williamson etary	of said reporting entity, and om any liens or claims thereoged to, is a full and true states come and deductions therefrocedures manual except to es and procedures, according tudes the related correspond statement. The electronic in the control of the control o	n, except as herein stated, and that ment of all the assets and liabilities om for the period ended, and have the extent that: (1) state law may go the best of their information ding electronic filing with the NAIC filing may be requested by various ristopher Isaak Treasurer
State of	Missouri	ss se and say that they are erty of the said reporting planations therein contain the reporting period stand Instructions and According to the reporting not related his attestation by the deerences due to electron Keith Harvey	e the described officers entity, free and clear from the described of its ined, annexed or referred above, and of its inclustry accounting practice scribed officers also including of the enclosed with the described officers also including of the enclosed with the described officers also including of the enclosed with the described officers also including of the enclosed with the described officers also included the described officers also included the described of the enclosed of the described	of said reporting entity, and om any liens or claims thereo ed to, is a full and true stere come and deductions therefrocedures manual except to es and procedures, accordireludes the related correspond statement. The electronic	n, except as herein stated, and that ment of all the assets and liabilities of from for the period ended, and have the extent that: (1) state law may go to the best of their information ding electronic filing with the NAIC filling may be requested by various ristopher Isaak Treasurer Yes [X] No [] t number

ASSETS

			Current Statement Date	;	4
		1	2	3	Daniel C
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1	Bonds			1,099,377	
	Stocks:			1,000,011	1,000,000
	2.1 Preferred stocks			0	0
	2.2 Common stocks				0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less				
	\$ encumbrances)			0	0
	4.2 Properties held for the production of income				
	(less \$ encumbrances)			0	0
	4.3 Properties held for sale (less				
	\$ encumbrances)			0	0
5.	Cash (\$1,586,686),				
	cash equivalents (\$0)				
	and short-term investments (\$0)		1		
	Contract loans (including \$ premium notes)			0	0
	Derivatives			0	0
1	Other invested assets		1		0
	Receivables for securities				0
	Securities lending reinvested collateral assets.				0
11.	Aggregate write-ins for invested assets	2 606 062	J	0	6 160 166
	Title plants less \$	2,000,003	Ι	2,000,003	0 , 109 , 450
13.	only)			0	0
14	Investment income due and accrued			10,907	
	Premiums and considerations:	10,507			, 7,720
10.	15.1 Uncollected premiums and agents' balances in the course of				
	collection	1,851,186		1,851,186	634,429
	15.2 Deferred premiums, agents' balances and installments booked but	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , ,	,
	deferred and not yet due (including \$earned				
	but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$	1 , 148 , 990		1 , 148 , 990	598,757
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	0
	16.2 Funds held by or deposited with reinsured companies		l		0
	16.3 Other amounts receivable under reinsurance contracts				0
1	Amounts receivable relating to uninsured plans	i e			0
l	Current federal and foreign income tax recoverable and interest thereon		<u> </u>	0	21,358
l	2 Net deferred tax asset		<u> </u>	0	0
l	Guaranty funds receivable or on deposit			<u>0</u>	ļ0 ļ
l	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets				
າາ	(\$		ı		
1	Receivables from parent, subsidiaries and affiliates		I	144	
	Health care (\$5,254,733) and other amounts receivable			5 , 254 , 733	4,561,387
1	Aggregate write-ins for other-than-invested assets		I0	0	η, σο 1, σο 7
	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	12,687,214	1,735,191	10,952,023	11,986,815
27.	From Separate Accounts, Segregated Accounts and Protected	:=, ••• ,= : :	1,100,101	,,	,,
	Cell Accounts			l	0
28.	Total (Lines 26 and 27)	12,687,214	1,735,191	10,952,023	11,986,815
	DETAILS OF WRITE-INS	, ,		, ,	, ,
1101.				L0	0
		i		0	0
1103.			ļ	0	0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501.				0	0
2502.				0	0
2503.				0	0
	Summary of remaining write-ins for Line 25 from overflow page		0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAP	, ,	Current Period		Prior Year
		1 Covered	2 Unanyarad	3 Total	4
1 Cla	aims unpaid (less \$ reinsurance ceded)		Uncovered	Total 1 339 505	Total 1 217 211
	crued medical incentive pool and bonus amounts				0
3. Un	paid claims adjustment expenses	75,389			81,653
4. Agg	gregate health policy reserves including the liability of				
	for medical loss ratio rebate per the Public Health				
	rvice Act.	i		i	
	gregate life policy reserves				_
	pperty/casualty unearned premium reservegregate health claim reserves				0
	emiums received in advance				
	eneral expenses due or accrued				
	rrent federal and foreign income tax payable and interest thereon (including				
\$	on realized gains (losses))	4,003		4 ,003	0
	et deferred tax liability				0
	ded reinsurance premiums payable				295
	nounts withheld or retained for the account of others				0
	mittances and items not allocated			0	0
	rrowed money (including \$ current) and				
	erest thereon \$ (including current)			0	0
	nounts due to parent, subsidiaries and affiliates				871,875
	rivatives.		i	· ·	
_	yable for securities	i	i		
	yable for securities lending				0
	nds held under reinsurance treaties (with \$				
autl	thorized reinsurers, \$ unauthorized reinsurers				
and	d \$certified reinsurers)			0	0
	insurance in unauthorized and certified (\$)				
	mpanies				0
	et adjustments in assets and liabilities due to foreign exchange rates				0
	ability for amounts held under uninsured plans	1,078,232		1,078,232	1,420,416
	gregate write-ins for other liabilities (including \$rrent)	216 262	0	216 262	21 205
	tal liabilities (Lines 1 to 23)				4,862,759
	gregate write-ins for special surplus funds				
	mmon capital stock			1	
	eferred capital stock				
	oss paid in and contributed surplus			1	
	rplus notes				
30. Agg	gregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
	assigned funds (surplus)	XXX	XXX	(1,376,139)	(1,578,512)
	ss treasury stock, at cost:				
	1shares common (value included in Line 26)	VVV	VVV		0
	2shares preferred (value included in Line 27				
)	XXX	XXX		0
	tal capital and surplus (Lines 25 to 31 minus Line 32)				7 , 124 , 058
	tal liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	10,952,023	11,986,817
	TAILS OF WRITE-INS				
	ate Income Tax Payable	2 086		2 086	21,205
	18 Health Insurer Fee.				21,200
	mmary of remaining write-ins for Line 23 from overflow page				0
	tals (Lines 2301 through 2303 plus 2398) (Line 23 above)	216,262	0	216,262	21,205
2501 . 201	18 Health Insurer Fee	XXX	XXX		877 ,570
2502		xxx	XXX		
2503		xxx	XXX		
2598. Sur	mmary of remaining write-ins for Line 25 from overflow page	xxx	xxx	0	0
	tals (Lines 2501 through 2503 plus 2598) (Line 25 above)	xxx	xxx	0	877,570
	`	XXX	XXX		0
				i	
	mmary of remaining write-ins for Line 30 from overflow page				0
3099. Tot	tals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENU		<u> </u>		
		Current Yo	ear To Date	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months			19,990	
l	Net premium income (including \$ non-health premium income)	l	i	i	
3.	Change in unearned premium reserves and reserve for rate credits	xxx		0	0
4.	Fee-for-service (net of \$medical expenses)	xxx		0	0
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues				
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX	49,324,221	40,031,679	54,312,766
1 -	al and Medical:		20,040,007	00 455 074	44 000 000
1	Hospital/medical benefits Other professional services	i	i	i	i
1	Ottner professional services Outside referrals	1		I	
12.	Emergency room and out-of-area				
13.	Prescription drugs	1	1	1	
14.	Aggregate write-ins for other hospital and medical.	1	1	1	
15.	Incentive pool, withhold adjustments and bonus amounts	1	1	1	
	Subtotal (Lines 9 to 15)	i	i .	i	i
Less:					
ı	Net reinsurance recoveries			0	0
18.	Total hospital and medical (Lines 16 minus 17)	1	1	1	l .
19.	Non-health claims (net)		1	1	
20.	Claims adjustment expenses, including \$ 16,725cost containment expenses.	l	567 , 313	400,549	616,266
i	General administrative expenses	i	6,330,228	4,199,511	5,899,991
22.	Increase in reserves for life and accident and health contracts (including		(4,000,705)	(4.004.404)	(050,000)
	\$ increase in reserves for life only)	1		1	
1	Total underwriting deductions (Lines 18 through 22)	1		I	
	Net investment income earned				
ı	Net realized capital gains (losses) less capital gains tax of \$		1	9,041	12,091
27.	Net investment gains (losses) (Lines 25 plus 26)				12,091
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			, , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	\$) (amount charged off \$)]			0	0
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	xxx	947 , 266	1,170,456	104,174
31.	Federal and foreign income taxes incurred	xxx	(35,068)	(133,381)	(532,053)
32.	Net income (loss) (Lines 30 minus 31)	XXX	982,334	1,303,837	636,227
	DETAILS OF WRITE-INS				,
0601.		XXX		0	0
0602. 0603.		XXX			0
	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	Totals (2.1.100 000 Filling 0000) (2.1.10 0 days 10)	XXX		0	0
0702.		XXX		0	0
0703.		xxx		0	0
0798.	Summary of remaining write-ins for Line 7 from overflow page	xxx	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401.				0	0
1402.			ļ	0	0
1403.				0	0
l	Summary of remaining write-ins for Line 14 from overflow page	l	0	J	0
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901.				ļ0	0
2902.				10	0
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page	^	0	0	0
1					
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	LENSES (Continue	a)
		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	7 , 124 , 057	6,541,177	6,541,177
34.	Net income or (loss) from Line 32	982,334	1,303,837	636,227
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax		0	0
39.	Change in nonadmitted assets			
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in		0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		0	0
47.	Aggregate write-ins for gains or (losses) in surplus		0	0
48.	Net change in capital and surplus (Lines 34 to 47)		901,265	582,880
49.	Capital and surplus end of reporting period (Line 33 plus 48)	6,448,858	7,442,442	7,124,057
	DETAILS OF WRITE-INS	-, -,	, ,	, , ,
4701.	DETAILS OF WINTE-ING			
4701.				
4703.	Cummon of compining units in fact in 47 from the fact in the fact	Δ	0	
4798.	Summary of remaining write-ins for Line 47 from overflow page			U
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

CASH FLOW

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance.	47 ,557 ,231	41,152,082	56 , 131 , 376
2.	Net investment income		5,499	11,000
3.	Miscellaneous income	0	0	(
4.	Total (Lines 1 to 3)	47,562,730	41,157,581	56,142,37
	Benefit and loss related payments	44,792,266	31,285,217	47 , 873 , 339
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	
7.	Commissions, expenses paid and aggregate write-ins for deductions	6,314,805	2,038,575	5,379,79
	Dividends paid to policyholders		0	
9.	Federal and foreign income taxes paid (recovered) net of \$			
	gains (losses)	(60,429)	(210,413)	
10.	Total (Lines 5 through 9)	51,046,642	33,113,379	52,988,67
	Net cash from operations (Line 4 minus Line 10)	(3,483,912)	8.044.202	3.153.69
	Cash from Investments	(0,100,01=)	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,122,00
12	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	0	0	
	12.2 Stocks	0	0	
	12.3 Mortgage loans		0	
	12.4 Real estate		0	
	12.5 Other invested assets		0	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	
	12.7 Miscellaneous proceeds	0	0	
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	-	0	
13	Cost of investments acquired (long-term only):	ــا لاـــــــــــــــــــــــــــــــــ		
10.	13.1 Bonds	(730)	0	
	13.2 Stocks			
	13.3 Mortgage loans		0	
	13.4 Real estate		0	
	13.5 Other invested assets	0	0	
	13.6 Miscellaneous applications	0	0	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	(730)	0	
11	, ,	(750)	0	
	Net increase (or decrease) in contract loans and premium notes	730	0	
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	730	0	
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):		0	
	16.1 Surplus notes, capital notes	0	0	
	16.2 Capital and paid in surplus, less treasury stock	0	0	
	16.3 Borrowed funds		0	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	
	16.5 Dividends to stockholders	0	0	
	16.6 Other cash provided (applied)		(1)	
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	2	(1)	
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(3,483,180)	8,044,201	3 , 153 , 69
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year.			
	19.2 End of period (Line 18 plus Line 19.1)	1,586,682	9,960,365	5,069,86

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STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Michigan Complete Health, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprel (Hospital 8	hensive	4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Health Benefits Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	2,478	0	0	0	0	0	0	2,478	0	0
2. First Quarter	2,776	0	0	0	0	0	0	2,776	0	0
3. Second Quarter	2,831	0	0	0	0	0	0	2,831	0	0
4. Third Quarter	2,568							2,568		
5. Current Year	0									
6. Current Year Member Months	24,300							24,300		
Total Member Ambulatory Encounters for Period:										
7. Physician	53,635							53,635		
8. Non-Physician	110,205							110,205		
9. Total	163,840	0	0	0	0	0	0	163,840	0	(
10. Hospital Patient Days Incurred	2,598							2,598		
11. Number of Inpatient Admissions	612							612		
12. Health Premiums Written (a)	49,324,221							49,324,221		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	49,324,221							49,324,221		
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	42,441,405							42,441,405		
18. Amount Incurred for Provision of Health Care Services	42,563,701							42,563,701		

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims unpaid (Reported) External Capitation.						
External Capitation	59 , 100					59 , 100
	+				 	·····
	+					
	<u> </u>					
						·
	<u> </u>					·····
0199999 Individually listed claims unpaid	59 , 100	<u> </u> 0	0	0	0	59 , 100
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered	1,280,405					1,280,405
0499999 Subtotals	1,339,505	0	0	0	0	1,339,505
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	1,339,505
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	0

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID-PRIOR			1:-1	.1114	1	1
		iims ar to Date	Liat End of Curr		5	6
	1	2	3) 5	٥
Line of Business	On Claims Incurred Prior to January 1 of	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical)					0	0
Medicare Supplement					0	0
3. Dental only					0	0
4. Vision only					0	0
Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare	1,140,431	46,555,707	42,968	1,296,537	1,183,399	1,217,210
7. Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	1,140,431	46,555,707	42,968	1,296,537	1,183,399	1,217,210
10. Health care receivables (a)		5,254,733			0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts					0	0
13. Totals (Lines 9-10+11+12)	1,140,431	41,300,974	42,968	1,296,537	1,183,399	1,217,210

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Michigan Complete Health, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the Michigan Department of Insurance.

The State of Michigan requires that insurance companies domiciled in the state of Michigan prepare their statutory basis financial statements in accordance with the NAIC *Accounting Practices and Procedures Manual* subject to any deviations prescribed or permitted by the State of Michigan Insurance Commissioner.

NET INCOME	SSAP#	F/S Page	F/S Line	State of Dominile	 2018	_	2017
(1) Michigan Complete Health, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	Michigan	\$ 982,335	\$	636,228
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: e.g., Depreciation of fixed assets				Michigan	\$ 	\$	
(3) State Permitted Practices that are an increase ((decrease) from NAIC SAP: e.g., Depreciation of fixed assets, home office property				Michigan	\$ 	\$	
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	Michigan	\$ 982,335	\$	636,228
SURPLIS							
(5) Michigan Complete Health, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	Michigan	\$ 6,448,861	\$	7,124,058
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: e.g., Goodwill, net e.g., Fixed Assets, net				Michigan	\$ 	\$	
(7) State Permitted Practices that are an increase (decrease) from NAIC SAP: e.g., Home Office Property				Michigan	\$ 	\$	
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	Michigan	\$ 6,448,861	\$	7,124,058

- B. Use of Estimates in the Preparation of the Financial Statements No Change
- C. Accounting Policy
 - 1.-5. No Change
 - 6. The Company holds no loan-backed securities.
 - 7.-13. No Change
- D. Going Concern The Company's management has not identified any conditions or events that raise substantial doubt about its ability to continue as a going concern

2. Accounting Changes and Corrections of Errors

No Change

3. Business Combinations and Goodwill

- A. Statutory Purchase Method No Change
- B. Statutory Merger No Change
- C. Assumption Reinsurance No Change
- D. Impairment Loss No Change

4. Discontinued Operations

No Change

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

None

B. Debt Restructuring

None

C. Reverse Mortgages

None

D. Loan-Backed Securities

None

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

None

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

None

H. Repurchase Agreements Transactions Accounted for as a Sale

None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

None

J. Real Estate

None

K. Low-Income Housing Tax Credits (LIHTC)

None

L. Restricted Assets

. Restricted Assets (Including Pledged)

	estricted Assets	2	3	4	5	6
		-		7		Percentage
						Admitted
		Total Gross			Percentage	Restricted
	Total Gross	Restricted	Increase/	Total Current	Gross	to Total
	Restricted from	PromPrior	(Decrease)	Year Admitted	Restricted to	Admitted
Restricted Asset Category	Current Year	Year	(1 minus 2)	Restricted	Total Assets	Assets
a. Subject to contractual			(1 1121100 2)			
obligation for which liability						
is not shown						
b. Collateral held under						
security lending agreements						
c. Subject to repurchase						
agreements						
d. Subject to reverse						
repurchase agreements						
e. Subject to dollar						
repurchase agreements						
f. Subject to dollar reverse						
repurchase agreements						
g. Placed under option						
contracts						
h. Letter stock or securities						
restricted as to sale						
i. FHLB capital stock						
i. On deposit with states	\$ 1.099.377	\$ 1.099.593	\$ (216)	\$ 1.099.377	9.0%	10.0%
k. On deposit with other						
regulatory bodies						
1. Pledged collateral to						
FHLB (including assets						
backing funding						
m. Pledged as collateral not						
captured in other categories						
n. Other restricted assets						
o. Total Restricted Assets	\$ 1,099,377	\$ 1.099.593	s (216)	\$ 1,099,377	9.0%	10.0%

- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories None
- 3. Detail of Other Restricted Assets None
- Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

 None

M. Working Capital Finance Investments

None

N. Offsetting and Netting of Assets and Liabilities

None

O. Structured Notes

None

P. 5* Securities

None

Q. Short Sales

None

R. Prepayment Penalties and Acceleration Fees

None

6. Joint Ventures, Partnerships and Limited Liability Companies

No Change

7. Investment Income

No Change

8. Derivative Instruments

No Change

9. Income Tax

No Change

10. Information Concerning Parent, Subsidiaries and Affiliates

Included in the Company's balance sheet as of September 30, 2018 are receivables from parent, subsidiaries and affiliates of \$144 generated in the normal course of business with Health Net of California, Inc.

11. Debt

- A. Capital Notes None
- B. FHLB (Federal Home Loan Bank) Agreements None

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

- A. Defined Benefit Plans None
- B. Investment Policies and Strategies for Plan Assets None
- C. Fair Value of Each Class of Plan Assets None
- D. Basis Used to Determine the Overall Expected Long-term Rate-of-Return-on-Assets Assumption None
- E. Defined Contribution Plan None
- F. Multiemployer Plan None
- G. Consolidated/Holding Company Plans None
- H. Postemployment Benefits and Compensated Absences None
- I. Impact of Medicare Modernization Act on Postretirement Benefits None

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No Change

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments None
- B. Assessments None
- C. Gain Contingencies None
- D. Claims Related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits None
- E. Joint and Several Liabilities None
- F. All Other Contingencies None

15. Leases

No Change

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No Change

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfer of Receivables Reported as Sales None
- B. Transfer and Servicing of Financial Assets None
- C. Wash Sales None

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

None

B. ASC Plans

None

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

As of September 30, 2018, the Company recorded a net payable to CMS that exceeds the greater of 10% of the Company's amounts payable for uninsured accident and health plans or \$10,000. The total balance for the Medicare Part D low-income subsidy and reinsurance subsidy is \$1,078,232.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No Change

20. Fair Value Measurement

A. Assets and liabilities recorded at fair value in the statutory statement of admitted assets, liabilities and capital and surplus are categorized based upon the extent to which the fair value estimates are based upon observable or unobservable inputs. Level inputs are as follows:

Level input	Input definition
Level I	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level II	Inputs other than quoted prices included in Level I that are observable for the asset or liability through corroboration with market data at the measurement date.
Level III	Unobservable inputs that reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

The following table summarizes fair value measurements by level at September 30, 2018 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability	_(L	evel 1)	_(Le	vel2)	(Le	ve13)	T	otal	Value Inclu	Asset (NAV) ded in vel 2
a. Assets at fair value										
Cash and Short-Term Investments										
Cash	S 1	,586,686	\$		\$	_	\$ 15	586,686	S	
Short-Term Investments	Š	,500,000	•		•		V 1,1	-	•	
Total Cash and Short-Term Investments	\$ 1	586 686	S	_	S	-	\$ 15	586,686	S	
Perpetual Preferred stock	٠.	,500,000	•		•		· -,-	,	•	
Industrial and Misc	S	_	S	_	S	_	S	_	S	_
Parent, Subsidiaries and Affiliates	•	_	•	_	•	_	•	_	•	_
Total Perpetual Preferred Stocks	S		S		S		S		S	
Bonds	•		•		•		•		•	
U.S. Governments	S	_	S	_	S	_	S	_	S	_
Industrial and Misc	•	_	•	_	•	_	•	_	•	_
Hybrid Securities		_		_		_		_		_
Parent, Subsidiaries and Affiliates		_		_		_		_		_
Total Bonds	S		S		S	_	S		S	
Common Stock	•		•		•		•		•	
Industrial and Misc	S	_	S	_	S	_	S	_	S	_
Parent, Subsidiaries and Affiliates	•	_	•	_	•	_	•	_	•	_
Total Common Stocks	S		S	_	S	_	S		S	
Derivative assets	•		•		•		•		•	
Interest rate contracts	S	_	S	_	S	_	S	_	S	_
Foreign exchange contracts	•	_	•	_	•	_	•	_	•	_
Credit contracts		_		_		_		_		_
Commodity futures contracts		_		_		_		_		_
Commo dity forward contracts		_		_		_		_		_
Total Derivatives	S		S		S	_	S		S	
Separate account assets	S		s	_	S	-	S		S	
Total assets at fair value	\$ 1	,586,686	s		S	-		586,686	S	
	-		-							
b. Liabilities at fair value										
Derivative liabilities	S	_	S	_	S	_	S	_	S	_
Total liabilities at fair value	S		s		S		S	_	s	

The following table summarizes fair value measurements by level at December 31, 2017 for assets and liabilities measured at fair value on a recurring basis:

Description for each class of asset or liability		evel l)	(Le	ve12)	(Le	vel 3)		Total	Value Inclu	Asset (NAV) ded in vel 2
a. Assets at fair value										
Cash and Short-Term Investments										
Cash	\$ 5	5,069,863	\$	-	S	-	\$ 5,	069,863	S	-
Short-Term Investments	S	-		-		-		-		-
Total Cash and Short-Term Investments	\$ 5	5,069,863	S	-	S	-	\$ 5,	069,863	S	-
Perpetual Preferred stock										
Indus trial and Misc	S	-	\$	-	S	-	\$	-	S	-
Parent, Subsidiaries and Affiliates		-		-		-		-		-
Total Perpetual Preferred Stocks	S	-	S	-	S	-	S	-	S	-

Bonds										
U.S. Governments	\$	-	S	-	S	-	S	-	S	-
Industrial and Misc		-		-		-		-		-
Hybrid Securities		-		-		-		-		-
Parent, Subsidiaries and Affiliates		_		_		_		_		-
Total Bonds	S	-	S	-	s	-	S	-	S	-
Common Stock										
Industrial and Misc	S	-	S	-	S	-	S	-	S	-
Parent, Subsidiaries and Affiliates		-		-		-		-		-
Total Common Stocks	S	-	S	-	S	-	S	-	S	-
Derivative assets										
Interest rate contracts	S	-	S	-	S	-	S	-	S	-
Foreign exchange contracts		-		-		-		-		-
Credit contracts		-		-		-		-		-
Commodity futures contracts		-		-		-		-		-
Commodity forward contracts		-		-		-		-		-
Total Derivatives	S	-	S	-	S	-	\$	-	\$	-
Separate account assets	S	-	S	-	S	-	S		\$	
Total assets at fair value	\$ 5,	069,863	\$	-	\$	-	\$ 5,	069,863	\$	
b. Liabilities at fair value										
Derivative liabilities	S	-	S	_	S	_	S	-	S	_
Total liabilities at fair value	S	-	S	-	S	-	S	-	S	-

B. None

C. The following table summarizes the aggregate fair value measurements by level at September 30, 2018 for all financial instruments.

Type of Financial Instrument	iggregate Bir Value		Admitted Assets	Level I	 evel II	Lev	vel III	Prac (Ca	Not ticable mying alue)	Và tue In ch	Asset (NAV) ided in ve12
Total Cash and											
Short-Term Investments	\$ 1,586,686	\$	1,586,686	\$ 1,586,686	\$ _	\$	_	\$	_	\$	_
Bonds	1,095,006		1,099,306	1,095,006	_		-		-		-
Common Stock	-		-	-	_		-		-		_
Perpetual Preferred Stock	-		-	-	-		-		-		-
Mortgage Loans	 	_	-	 -	 -	_	-				-
Tota1	\$ 2,681,692	\$	2,685,992	\$ 2,681,692	\$ _	\$	_	\$		\$	_

The following table summarizes the aggregate fair value measurements by level at December 31, 2017 for all financial instruments.

Type of Financial Instrument	ggregate 'air Value		Admitted Assets		Level I	L	evei II	Lev	re1 III	Prac (Car	Not ticable mying abse)	Value Inch	Asset (NAV) uded in evel 2
Total Cash and													
Short-Term Investments	\$ 5,069,863	\$	5,069,863	\$	5,069,863	\$	-	\$	-	\$	-	\$	-
Bonds	1,098,449		1,099,593		1,098,449		-		-		-		-
Common Stock	-		-		-		-		-		-		-
Perpetual Preferred Stock	-		-		-		-		-		-		-
Mortgage Loans	 	_		_	-		-	_	-		-		-
Total	\$ 6,168,312	\$	6,169,457	\$	6,168,312	\$	-	\$	-	\$		\$	-

D. None

21. Other Items

- A. Extraordinary Items No Change
- B. Troubled Debt Restructuring: Debtors No Change
- C. Other Disclosures and Unusual Items No Change
- $D. \quad Business\ Interruption\ Insurance\ Recoveries-No\ Change$
- $E. \quad State \ Transferable \ and \ Non-Transferable \ Tax \ Credits-No \ Change$
- F. Subprime Mortgage Related Risk Exposure No Change

- G. Retained Assets No Change
- H. Insurance-Linked Securities (ILS) Contracts No Change

22. Events Subsequent

Type I – Recognized Subsequent Events

Subsequent events have been considered through November 14, 2018 for the statutory statement issued as of September 30, 2018 on November 14, 2018.

None

<u>Type II – Nonrecognized Subsequent Event</u>

Subsequent events have been considered through November 14, 2018 for the statutory statement issued as of September 30, 2018 on November 15, 2018.

None

23. Reinsurance

- A. Ceded Reinsurance Report No Change
- B. Uncollectible Reinsurance No Change
- C. Commutation of Ceded Reinsurance No Change
- D. Certified Reinsurance Rating Downgraded or Status Subject to Revocation No Change

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- **A.** The Company estimates accrued retrospective premiums for its federal and state sponsored programs in accordance with the provisions in its contract with the Centers for Medicare and Medicaid Services and the Michigan Department of Health and Human Services.
- B. The Company records accrued retrospective premium through written premium.
- C. The amount of net premiums written by the Company at September 30, 2018 which are subject to retrospective rating features were \$49.3 million, which represents 100% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.
- D. Medical Loss Ratio Rebates Required per Public Health Service Act No Change
- E. Risk-Sharing Provisions of the Affordable Care Act (ACA) None

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves for incurred claims and claim adjustment expenses as of December 31, 2017 were \$1.22 million. As of September 30, 2018, \$1.14 million has been paid for incurred claims and claims adjustment expense attributable to insured events of prior years. Reserves remaining for prior years are now \$0.04 million, as a result of re-estimation of unpaid claims and claims adjustment expenses. Therefore, there has been a \$0.04 million favorable prior-year development since December 31, 2017 to September 30, 2018. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements

No Change

27. Structured Settlements

No Change

28. Health Care Receivables

- 1. Pharmaceutical Rebate Receivables At September 30, 2018, the Company admitted healthcare receivables of \$462,485. These are admitted in accordance with SSAP No. 84 as they are estimated amounts related solely to actual prescriptions filled during the 3 months immediately preceding the reporting date. The amounts are estimated based on historical per script rebates and the actual number of scripts during the period.
- 2. Risk Sharing Receivables No Change

29. Participating Policies

No Change

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves \$0.00

2. Date of the most recent evaluation of this liability October 15, 2018

3. Was anticipated investment income utilized in this calculation? Yes

31. Anticipated Salvage and Subrogation

No Change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Did the reporting entity	y experience any material tra	ansactions requiring the filing of Disclosure of	Material Transact	ions with the S	tate of	Y	es []	No [X]
1.2			y state?				Υ	'es []	No []
2.1			s statement in the charter, by-laws, articles of				Y	es []	No [X]
2.2	If yes, date of change	:								
3.1	Is the reporting entity which is an insurer?	a member of an Insurance F	dolding Company System consisting of two or	more affiliated pe	rsons, one or r	more of	Y	'es [X	(]	No []
	If yes, complete Sche	dule Y, Parts 1 and 1A.								
3.2	Have there been any	substantial changes in the o	rganizational chart since the prior quarter end	?			Y	es []	No [X]
3.3	•	is yes, provide a brief descri	ption of those changes.							
3.4	Is the reporting entity	publicly traded or a member	of a publicly traded group?				Υ	'es [)	(]	No []
3.5	If the response to 3.4	is yes, provide the CIK (Cen	tral Index Key) code issued by the SEC for the	e entity/group				0	0010	071739
4.1	Has the reporting entire	ty been a party to a merger of	or consolidation during the period covered by	this statement?			Y	es []	No [X]
4.2		ne of entity, NAIC Company esult of the merger or consol	Code, and state of domicile (use two letter stillidation.	ate abbreviation) f	or any entity th	at has				
			1 Name of Entity N	2 AIC Company Cod	e State of I					
5.6.16.2	fact, or similar agreem If yes, attach an expla State as of what date State the as of date th	nent, have there been any si nation. the latest financial examinat the latest financial exami	agreement, including third-party administrator gnificant changes regarding the terms of the action of the reporting entity was made or is being nation report became available from either thance sheet and not the date the report was contact.	agreement or princing made.	cipals involved	?a entity.		1	2/3	1/2017
6.3	or the reporting entity.	This is the release date or o	ion report became available to other states or completion date of the examination report and	I not the date of th	e examination	(balance		0	6/2	4/2014
6.4	By what department o									
	0 ,		al Services							
6.5	statement filed with De	ement adjustments within the epartments?	e latest financial examination report been acc	ounted for in a sub	sequent finan	cial	Yes []	No []	NA [X]
6.6			financial examination report been complied w				Yes [X]	No []	NA []
7.1			thority, licenses or registrations (including co during the reporting period?				Υ	'es []	No [X]
7.2	If yes, give full informa	ation:								
8.1	Is the company a subs	sidiary of a bank holding con	npany regulated by the Federal Reserve Boar	·d?			Υ	es []	No [X]
8.2	,	•	of the bank holding company.							
8.3 8.4	Is the company affiliat If response to 8.3 is yo federal regulatory serv	ed with one or more banks, es, please provide below the vices agency [i.e. the Federa	thrifts or securities firms? e names and location (city and state of the ma al Reserve Board (FRB), the Office of the Cor curities Exchange Commission (SEC)] and id	in office) of any af	filiates regulate	ed by a the Federal	Y	es []	No [X]
		1	2	3	4	5	6	\neg		
	Affil	iate Name	Location (City, State)	FRB	occ	FDIC	SEC			

GENERAL INTERROGATORIES

9.1		fficers (principal executive officer, principal financial officer, princ) of the reporting entity subject to a code of ethics, which include					Yes [X]	No []
	(a) Honest and	ethical conduct, including the ethical handling of actual or appar	ent conflic	ts of interest between per	sonal and	d professional relationships	3;	
		curate, timely and understandable disclosure in the periodic repo						
	(c) Compliance	with applicable governmental laws, rules and regulations;						
	(d) The prompt	internal reporting of violations to an appropriate person or perso	ns identifi	ed in the code; and				
	(e) Accountabili	ty for adherence to the code.						
9.11	·	o 9.1 is No, please explain:						
9.2		ethics for senior managers been amended?					Yes []	No [X]
							100 []	no [n]
9.21		o 9.2 is Yes, provide information related to amendment(s).						
9.3	Have any provis	ions of the code of ethics been waived for any of the specified of	fficers?				Yes []	No [X]
9.31	·	o 9.3 is Yes, provide the nature of any waiver(s).						
			ANCI					
10.1	Does the reporti	ng entity report any amounts due from parent, subsidiaries or aff	iliates on	Page 2 of this statement?			Yes [X]	No []
10.2	If yes, indicate a	ny amounts receivable from parent included in the Page 2 amou	ınt:			\$		0
		INVE	STM	ENT				
11.1		stocks, bonds, or other assets of the reporting entity loaned, pla er person? (Exclude securities under securities lending agreeme					Yes []	No [X]
11.2	•	nd complete information relating thereto:	,,					
	,							
12.	Amount of real e	state and mortgages held in other invested assets in Schedule I	BA:			\$		0
13.	Amount of real e	estate and mortgages held in short-term investments:				\$		0
14.1	Does the repor	ting entity have any investments in parent, subsidiaries and affili	ates?				Yes []	No [X]
14.2	If yes, please c	omplete the following:						
				1 Prior Year-End Book/Adjusted Carrying Value		2 Current Quarter Book/Adjusted Carrying Value		
		Bonds						
		Preferred Stock						
	14.24	Short-Term Investments	\$.		\$			
		Mortgage Loans on Real Estate						
		Total Investment in Parent, Subsidiaries and Affiliates	,		Ψ.			
	14.00	(Subtotal Lines 14.21 to 14.26) Total Investment in Parent included in Lines 14.21 to 14.26	\$.	0	\$	0		
	14.20	above	\$.		\$			
15.1	Has the reporting	g entity entered into any hedging transactions reported on Sched	dule DB?				Yes []	No [X]
15.2	If yes, has a con	nprehensive description of the hedging program been made avail	ilable to th	e domiciliary state?			Yes []	No []

If no, attach a description with this statement.

GENERAL INTERROGATORIES

	16.1 Total fair valu 16.2 Total book ad 16.3 Total payable	L, Parts 1 and 2	\$0 \$0 \$0				
	entity's offices, vaults pursuant to a custodi Considerations, F. Ou	or safety deposit boxes, wal agreement with a qualificutsourcing of Critical Funct	rere all stocks, bond ed bank or trust com ons, Custodial or S	ls and other npany in acc afekeeping	r securities, owned cordance with Sect Agreements of the	tments held physically in the reporting throughout the current year held ion 1, III – General Examination NAIC Financial Condition Examiners	3
17.1	For all agreements th	at comply with the require	nents of the NAIC F	inancial Co	ondition Examiners	Handbook, complete the following:	
			1 of Custodian(s)			2 Custodian Address	
		US Bank			P0 Box 1800, St	:. Paul, MN 55101	
	For all agreements th location and a comple		equirements of the	NAIC Finan	ncial Condition Exa	miners Handbook, provide the name,	
		1 Name(s)		2 Location((s)	3 Complete Explanation(s)	
17.3	Have there been any	changes, including name	changes, in the cust	odian(s) ide	entified in 17.1 duri	ng the current quarter?	Yes [] No [X]
17.4	If yes, give full and co	omplete information relating	thereto:	. ,			
		1 Old Custodian	2 New Custod	lian	3 Date of Change	4 Reason	
	authority to make inve		If of the reporting er	ntity. For as	sets that are mana	including individuals that have the ged internally by employees of the ties"]	
	N					liation	
7.5097		iduals listed in the table for a "U") manage more than				ed with the reporting entity	Yes [] No []
7.5098		unaffiliated with the reporti under management aggre					Yes [] No []
17.6	For those firms or ind	ividuals listed in the table		ation code		"U" (unaffiliated), provide the informa	
	Central Regis Depository No	tration Nam umber Ir	2 e of Firm or idividual	Į.	3 Legal Entity dentifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
]			
18.1	Have all the filing req	uirements of the <i>Purposes</i>	and Procedures Ma	anual of the	NAIC Investment	Analysis Office been followed?	
18.2	If no, list exceptions:						
19.		*GI securities, the reporting on necessary to permit a fu			_	n self-designated 5*GI security:	
	b. Issuer or obliqc. The insurer h	gor is current on all contract as an actual expectation o	ted interest and prirelation	ncipal paym of all contra	nents. cted interest and pr	•	V (1 N (V)
	Has the reporting ent	ity self-designated 5*GI se	cunties?				Yes [] No [X]

${\bf STATEMENT\ AS\ OF\ SEPTEMBER\ 30,\ 2018\ OF\ THE\ Michigan\ Complete\ Health,\ Inc.}$

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:					
1.1 A&H loss percent	····-—		ł	84.2 %	
1.2 A&H cost containment percent	······ <u> </u>			0.0 %	
1.3 A&H expense percent excluding cost containment expenses.	<u> </u>			13.9 %	
2.1 Do you act as a custodian for health savings accounts?		Yes	[]	No [X]	
2.2 If yes, please provide the amount of custodial funds held as of the reporting date	\$				
2.3 Do you act as an administrator for health savings accounts?		Yes	[]	No [X]	
2.4 If yes, please provide the balance of the funds administered as of the reporting date	\$				
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes	[]	No [X]	
3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domic the reporting entity?		Yes	[]	No [X]	

SCHEDULE S - CEDED REINSURANCE

			Showing All New Reinsurance Tr	eaties - Current Year to Date				
1 NAIC	2	3 Effective	4	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified
Company Code	ID Number	Date	Name of Reinsurer	Jurisdiction	Ceded	Type of Reinsurer	(1 through 6)	Reinsurer Rating
			LIFE & ANNUITY — AFFILIALES					
			Name of Reinsurer LIFE & ANNUITY — AFFILIATES LIFE & ANNUITY — NON-AFFILIATES ACCIDENT & HEALTH — AFFILIATES ACCIDENT & HEALTH — NON-AFFILIATES PARTNERRE AMER INS CO. PROPERTY/CASUALTY — AFFILIATES PROPERTY/CASUALTY — NON-AFFILIATES					
			ACCIDENT & HEALTH — AFFILIATES					1
	-		ACCIDENT & HEALTH — NON-AFFILIATES					
11835	<u>04 - 1590940.</u> .	L01/01/2018.	PARTNERRE AMER INS CO	DE	SSL/I/L	Authorized		
			PROPERTY/CASUALTY — AFFILIATES					
			PROPERTY/CASUALTY NON-AFFILIATES					
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

Direct Business Only Federal Employees Health Life & Annuity Property/ Casualty Accident & Benefits Total Active Medicare Medicaid Columns Deposit-Type Program Other Premiums States. Etc Status (a) 2 Through 7 Title XVIII Title XIX Premiums Consideration Premiums Contracts 1. Alabama ALN 0 2. Alaska ΔK Ν 0 3. Arizona Α7 N 0 4. Arkansas AR Ν n 5. California CA Ν 0 6. СО N. 0 7. СТ N .0 8. Delaware .. DE N. 0 .0 Dist. Columbia DC 10. Florida FL GΑ .N. .0 11. Georgia ΗΙ .N. .0 12. Hawaii .0 Ν 13. Idaho ID .0 N. 14. Illinois IL 0 15. Indiana IN Ν 16. Iowa IΑ Ν 0 17. Kansas KS Ν 0 18. Kentucky ΚY Ν 0 19. Louisiana LA N 0 20. Maine ME Ν 0 21. Maryland MD N. 0 22. Massachusetts MΑ N. .0 МІ .49,324,221 .49,324,221 23. Michigan. 24. Minnesota MN N. 25. Mississippi MS 26. Missouri .. МО N. .0 ۵. 27. Montana MT .N. .0 NE N. 28. Nebraska 29. Nevada ... NV .N. .0 Ν 0 30. New Hampshire. NH 0 31. New Jersey NJ N 32. New Mexico NM Ν 0 33. New York NY N 0 34. North Carolina NC N 0 35. North Dakota ND Ν 0 36. Ohio... ОН N Λ 37. Oklahoma OK Ν 0 OR N. 0 38. Oregon 39. РΑ N 0 Pennsylvania 0 40. Rhode Island RI 41. South Carolina SC N. .0 42. South Dakota ... 0. SD .N. .0 ΤN .N. 43. Tennessee0 44. Texas ΤX N. 45. Utah. UT N. .0 46. Vermont VT Ν 0 47. Virginia. VA Ν 0 48. Washington WA Ν 0 49. West Virginia ۱۸۸/ N 0 50. Wisconsin ... WI Ν 0 51. Wyoming . WY N Λ 52. American Samoa ... AS Ν 0 GU N. 0 54. Puerto Rico ... PR N 0 55. U.S. Virgin Islands ... VI .N. 56. Northern Mariana Islands MP .N. .0 CAN ۵. 57. CanadaN. XXX. .0 0 ..0 .0 .0 0 .0 58. Aggregate other alienQT .0 .49,324,221 .0 .49,324,221 59. Subtotal... XXX .0 .0 ..0 .0 60. Reporting entity contributions for Employee Benefit Plans.. XXX 61 Total (Direct Business) XXX 49,324,221 0 0 0 49,324,221 DETAILS OF WRITE-INS 58001 XXX 58002 ХХХ 58003. XXX. 58998. Summary of remaining write-ins for XXX. 0 .0 0 ..0 .0 0 .0 Line 58 from overflow page. 58999. Totals (Lines 58001 through 58003 XXX 0 0 0 0 0 0 0 plus 58998) (Line 58 above)

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG1	R – Registered – Non-domiciled RRGs
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state0	Q – Qualified – Qualified or accredited reinsurer0
N – None of the above – Not allowed to write business in the state56	

(a) Active Status Counts

Centene Corporation	42-1406317	DE	
Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	
Peach State Health Plan, Inc	20-3174593	GA	12315
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Iowa Total Care, Inc	46-4829006	IA	15713
Buckeye Community Health Plan, Inc	32-0045282	ОН	11834
Health Plan Real Estate Holding, Inc (13%)	46-2860967	MO	
Absolute Total Care, Inc	20-5693998	SC	12959
Health Plan Real Estate Holding, Inc (1%)	46-2860967	MO	
Coordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
Health Plan Real Estate Holding, Inc (15%)	46-2860967	MO	
Healthy Washington Holdings, Inc	46-5523218	DE	
Coordinated Care of Washington, Inc	46-2578279	WA	15352
Managed Health Services Insurance Corp	39-1678579	WI	96822
Health Plan Real Estate Holding, Inc (2%)	46-2860967	MO	
Hallmark Life Insurance Co	86-0819817	AZ	60078
Superior HealthPlan, Inc	74-2770542	TX	95647
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Healthy Louisiana Holdings LLC	27-0916294	DE	
Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Magnolia Health Plan Inc	20-8570212	MS	13923
IlliniCare Health Plan, Inc	27-2186150	IL	14053
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunshine Health Holding LLC	26-0557093	FL	
Sunshine State Health Plan, Inc	20-8937577	FL	13148
Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
Healthy Missouri Holding, Inc (95%)	45-5070230	MO	
Home State Health Plan, Inc	45-2798041	MO	14218
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunflower State Health Plan, Inc	45-3276702	KS	14345
Granite State Health Plan, Inc	45-4792498	NH	14226
California Health and Wellness Plan	46-0907261	CA	
Michigan Complete Health, Inc.	30-0312489	MI	10769
Western Sky Community Care, Inc.	45-5583511	NM	16351
SilverSummit Healthplan, Inc.	20-4761189	NV	16143
Agate Resources, Inc.	20-0483299	OR	
Trillium Community Health Plan, Inc.	42-1694349	OR	12559
Agate Properties, LLC	26-4475075	OR	
Nebraska Total Care, Inc.	47-5123293	NE	15902
Pennsylvania Health & Wellness, Inc.	47-5340613	PA	16041

Superior HealthPlan Community Solutions, Inc.	47-5664832	TX	15912
Sunshine Health Community Solutions, Inc.	47-5667095	FL	15927
Buckeye Health Plan Community Solutions, Inc.	47-5664342	ОН	16112
Arkansas Health & Wellness Health Plan, Inc.	81-1282251	AR	16130
Arkansas Total Care Holding Company, LLC (49%)	38-4042368	DE	
Arkansas Total Care, Inc.	82-2649097	AR	16256
Healthy Oklahoma Holdings, Inc.	81-2788043	DE	
Oklahoma Complete Health Inc.	81-3121527	OK	
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona Inc.	20-4980818	AZ	
Celtic Group, Inc	36-2979209	DE	
Celtic Insurance Company	06-0641618	IL	80799
Ambetter of Magnolia Inc	35-2525384	MS	15762
Ambetter of Peach State Inc.	36-4802632	GA	15729
Novasys Health, Inc	27-2221367	DE	
CeltiCare Health Plan Holdings LLC	26-4278205	DE	
CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
Centene Management Company LLC	39-1864073	WI	
CMC Real Estate Co. LLC	20-0057283	DE	
Centene Center LLC	26-4094682	DE	
Centene Center I, LLC	82-1816153	DE	
Centene Center II, LLC	47-5156015	DE	
Centene Center III, LLC	82-3210933	DE	
CMC Hanley, LLC	46-4234827	MO	
Forhan, LLC	47-2914561	MO	
Hanley-Forsyth, LLC	37-1766939	MO	
GPT Acquisition LLC	45-5431787	DE	
Clayton Property Investment LLC	45-4372065	DE	
LSM Holdco, Inc.	46-2794037	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
Arkansas Total Care Holding Company, LLC (25%)	38-4042368	DE	
CCTX Holdings, LLC	20-2074217	DE	
Centene Company of Texas, LP (1%)	74-2810404	TX	
Centene Holdings, LLC	20-2074277	DE	
Centene Company of Texas, LP (99%)	74-2810404	TX	
MHS Travel & Charter, Inc	43-1795436	WI	
Health Care Enterprises, LLC	46-4855483	DE	
Envolve Holdings, Inc.	22-3889471	DE	
Cenpatico Behavioral Health, LLC	68-0461584	CA	
CBHSP Arizona, Inc	86-0782736	AZ	
Cenpatico of California, Inc	47-2595704	CA	

	Integrated Mental Health Mgmt, LLC	74-2892993	TX	
	Integrated Mental Health Services	74-2785494	TX	
	Cenpatico Behavioral Health of Arizona, LLC	20-1624120	AZ	
	Cenpatico of Arizona Inc. (80%)	80-0879942	AZ	
	Envolve, Inc.	37-1788565	DE	
	AHA Administrative Services, LLC	47-4545413	AL	
	Envolve - New York, Inc.	47-3454898	NY	
	Community Care of Central Colorado, LLC	82-2288767	DE	
	Envolve PeopleCare, Inc.	06-1476380	DE	
	LiveHealthier, Inc.	47-2516714	DE	
	Envolve Benefits Options, Inc.	61-1846191	DE	
	Envolve Vision Benefits, Inc.	20-4730341	DE	
	Envolve Captive Insurance Company, Inc.	36-4520004	SC	
	Envolve Vision of Texas, Inc.	75-2592153	TX	95302
	Envolve Vision, Inc	20-4773088	DE	
	Envolve Vision of Florida, Inc	65-0094759	FL	
	Envolve Total Vision, Inc.	20-4861241	DE	
	Envolve Dental, Inc.	46-2783884	DE	
	Envolve Dental of Florida, Inc.	81-2969330	FL	
	Envolve Dental of Texas, Inc.	81-2796896	TX	16106
	Envolve Pharmacy Solutions, Inc.	77-0578529	DE	
	LBB Industries, Inc	76-0511700	TX	
	RX Direct, Inc	75-2612875	TX	
	Envolve Pharmacy IPA, LLC	46-2307356	NY	
Ca	senet LLC	90-0636938	DE	
	Casenet S.R.O.	Foreign	CZE	
Ce	enturion Group, Inc	61-1450727	DE	
	Centurion LLC (51%)	90-0766502	DE	
	Centurion of Arizona, LLC	81-4228054	AZ	
	Centurion of Vermont, LLC	47-1686283	VT	
	Centurion of Mississippi, LLC	47-2967381	MS	
	Centurion of Tennessee, LLC	30-0752651	TN	
	Massachusetts Partnership for Correctional Healthcare, LLC	61-1696004	MA	
	Centurion of Minnesota, LLC	46-2717814	MN	
	Centurion Correctional Healthcare of New Mexico, LLC	81-1161492	NM	
	Centurion of Florida, LLC	81-0687470	FL	
	Centurion of Illinois, LLC	81-3007264	IL	
	Centurion of Maryland, LLC	81-4938030	MD	
	Centurion of Philadelphia, LLC	81-5429405	PA	
	Centurion Detention Health Services, LLC	82-4735175	DE	
	Centurion of New Hampshire, LLC	82-4823469	DE	

MUM Consissed Inc.	00 5046540	DE
MHM Services, Inc.	82-5316510	DE
Centurion LLC (49%) MHM Correctional Services, Inc.	90-0766502 54-1856340	DE DE
·	20-2750269	MD
MHM Maryland, Inc.		OH
MHM Ohio, Inc.	56-2547206	_
MHM Services of California, Inc.	51-0620904	CA
MHM Solutions, Inc.	60-0002002	DE
Forensic Health Services, Inc.	26-1877007	DE
MHM Health Professionals, Inc.	46-1734817	DE
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE
Specialty Therapeutic Care, LP (99.99%)	73-1698808	TX
Specialty Therapeutic Care, GP, LLC	73-1698807	TX
Specialty Therapeutic Care, LP (0.01%)	73-1698808	TX
Specialty Therapeutic Care West, LLC	26-2624521	TX
AcariaHealth Solutions, Inc.	80-0856383	DE
AcariaHealth, Inc.	45-2780334	DE
AcariaHealth Pharmacy #14, Inc	27-1599047	CA
AcariaHealth Pharmacy #11, Inc	20-8192615	TX
AcariaHealth Pharmacy #12, Inc	27-2765424	NY
AcariaHealth Pharmacy #13, Inc	26-0226900	CA
AcariaHealth Pharmacy, Inc	13-4262384	CA
HomeScripts.com, LLC	27-3707698	MI
New York Rx, Inc.	20-8235695	NY
Foundation Care, LLC (80%)	20-0873587	MO
U.S. Medical Management Holdings, Inc	27-0275614	DE
U.S. Medical Management, LLC (20%)	38-3153946	DE
U.S. Medical Management, LLC (80%)	38-3153946	DE
RMED, LLC	31-1733889	FL
IAH of Florida, LLC	47-2138680	FL
Heritage Home Hospice, LLC	51-0581762	MI
Grace Hospice of Austin, LLC	20-2827613	MI
ComfortBrook Hospice, LLC	20-1530070	OH
Comfort Hospice of Texas, LLC	20-4996551	MI
Grace Hospice of San Antonio, LLC	20-2827526	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Grace Hospice of Indiana, LLC	45-0634905	MI
Grace Hospice of Virginia, LLC	45-5080637	MI
Comfort Hospice of Missouri, LLC	45-5080567	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Grace Hospice of Illinois, LLC	81-5129923	IL
Seniorcorps Peninsula, LLC	26-4435532	VA

	R&C Healthcare, LLC	33-1179031	TX	
	Pinnacle Senior Care of Missouri, LLC	46-0861469	MI	
	Country Style Health Care, LLC	03-0556422	TX	
	Phoenix Home Health Care, LLC	14-1878333	DE	
	Traditional Home Health Services, LLC	75-2635025	TX	
	Family Nurse Care, LLC	38-2751108	MI	
	Family Nurse Care II, LLC	20-5108540	MI	
	Family Nurse Care of Ohio, LLC	20-3920947	MI	
	Pinnacle Senior Care of Wisconsin, LLC	46-4229858	WI	
	Pinnacle Senior Care of Indiana, LLC	81-1565426	MI	
	Pinnacle Home Care, LLC	76-0713516	TX	
	North Florida Health Services, Inc	59-3519060	FL	
	Pinnacle Sr. Care of Kalamazoo, LLC	47-1742728	MI	
	Hospice DME Company, LLC	46-1734288	MI	
	Rapid Respiratory Services, LLC	20-4364776	DE	
	USMM Accountable Care Network, LLC	46-5730959	DE	
	USMM Accountable Care Partners, LLC	46-5735993	DE	
	USMM Accountable Care Solutions, LLC	46-5745748	DE	
	USMM ACO, LLC	45-4165480	MI	
	USMM ACO Florida, LLC	45-4157180	MI	
	USMM ACO North Texas, LLC	45-4154905	MI	
Health	Net, Inc.	47-5208076	DE	
	Health Net of California, Inc.	95-4402957	CA	
	Health Net Life Insurance Company	73-0654885	CA	66141
	Health Net Life Reinsurance Company	98-0409907	CYM	
	Health Net of California Real Estate Holdings, Inc.	54-2174069	CA	
	Managed Health Network, LLC	95-4117722	DE	
	Managed Health Network	95-3817988	CA	
	MHN Services, LLC	95-4146179	CA	
	Health Net Federal Services, LLC	68-0214809	DE	
	MHN Government Services LLC	42-1680916	DE	
	MHN Global Services, Inc.	51-0589404	DE	
	MHN Government Services-Belgium, Inc.	80-0852000	DE	
	MHN Government Services-Diibouti, Inc.	90-0889816	DE	
	MHN Government Services-Germany, Inc.	80-0852008	DE	
	MHN Government Services-Guam, Inc.	90-0889803	DE	
	MHN Government Services-International, Inc.	90-0889825	DE	
	MHN Government Services-Italy, Inc.	80-0852019	DE	
	MHN Government Services-Japan, Inc.	46-1038058	DE	
	MHN Government Services-Puerto Rico, Inc.	90-0889815	DE	
	MHN Government Services-Turkey, Inc.	90-0889824	DE	
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MHN Government Services-United Kingdom, Inc.	90-0889833	DE	
Network Providers, LLC (10%)	88-0357895	DE	
Health Net Preferred Providers, LLC	61-1388903	DE	
Health Net Veterans, LLC	35-2490375	DE	
Network Providers, LLC (90%)	88-0357895	DE	
Health Net of the Northeast, LLC (25%)	06-1116976	DE	
Health Net of the Northeast, LLC (75%)	06-1116976	DE	
QualMed, Inc.	84-1175468	DE	
QualMed Plans for Health of Colorado, Inc.	84-0975985	CO	
Health Net Health Plan of Oregon, Inc.	93-1004034	OR	95800
HSI Advantage Health Holdings, Inc.	23-2867299	DE	
QualMed Plans for Health of Western Pennsylvania, Inc.	23-2867300	PA	
Pennsylvania Health Care Plan, Inc.	25-1516632	PA	
Health Net Services Inc.	94-3037822	DE	
Health Net Community Solutions, Inc.	54-2174068	CA	
Health Net of Arizona, Inc.	36-3097810	AZ	95206
Health Net One Payment Services, Inc.	54-2153100	DE	
Health Net of Pennsylvania, LLC	n/a	PA	
QualMed Plans for Health of Pennsylvania, Inc.	23-2456130	PA	
FH Surgery Limited, Inc.	68-0390434	CA	
Foundation Health Facilities, Inc.	68-0390438	CA	
FH Assurance Company	98-0150604	CYM	
Health Net Pharmaceutical Services	68-0295375	CA	
Health Net of Arizona Administrative Services, Inc.	86-0660443	AZ	
Health Net Community Solutions of Arizona, Inc.	81-1348826	AZ	15895
National Pharmacy Services Inc.	84-1301249	DE	
Integrated Pharmacy Systems, Inc. (90%)	23-2789453	PA	
FH Surgery Centers Inc.	68-0390435	CA	
Greater Sacramento Surgery Center LP (66%)	68-0343818	CA	
Health Net Access, Inc.	46-2616037	AZ	
MHS Consulting, International, Inc	20-8630006	DE	
PRIMEROSALUD, S.L.	Foreign	ESP	
MH Services International Holdings (UK) Limited	Foreign	GBR	
MH Services International (UK) Limited	Foreign	GBR	
Centene UK Ltd.	Foreign	GBR	
The Practice (Group) Limited	Foreign	GBR	
Centene Health Plan Holdings, Inc.	82-1172163	DE	
Ambetter of North Carolina, Inc.	82-5032556	NC	16395
Carolina Complete Health Holding Company Partnership (80%)	82-2699483	DE	
Carolina Complete Health, Inc.	82-2699332	NC	
New York Quality Healthcare Corporation f/k/a Centene Acquisition Corporation	82-3380290	NY	

Salus Administrative Services, Inc.	55-0878053	NY
Salus IPA, LLC	82-0802846	NY
Centene Company of New York, LLC	82-3385593	NY
Calibrate Acquisition Co	82-4670677	DE
Community Medical Holdings Corp	47-4179393	DE
Access Medical Acquisition, Inc.	46-3485489	DE
Access Medical Group of North Miami Beach, Inc.	45-3191569	FL
Access Medical Group of Miami, Inc.	45-3191719	FL
Access Medical Group of Hialeah, Inc.	45-3192283	FL
Access Medical Group of Westchester, Inc.	45-3199819	FL
Access Medical Group of Opa-Locka, Inc.	45-3505196	FL
Access Medical Group of Perrine, Inc.	45-3192955	FL
Access Medical Group of Florida City, Inc.	45-3192366	FL
Access Medical Group of Tampa, Inc.	82-1737078	FL
Access Medical Group of Tampa II, Inc.	82-1750978	FL
Access Medical Group of Tampa III, Inc.	82-1773315	FL
Interpreta Holdings, Inc. (80.1%)	82-4883921	DE
Interpreta, Inc.	46-5517858	DE
Patriots Holding Co	82-4581788	DE
RxAdvance Corporation (27.83%)		DE

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board.	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to	1	Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent. Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence Other)		Entity(ies)/Person(s)	(Y/N)	*
Oode	Group Name	Couc	Hamber	ROOD	Ont	New York Stock	Of Attiliates	Location	Little	Shareholders/Board of	Shareholders/Boa		Shareholders/Board	(1/14)	
01295	Centene Corporation	00000	42-1406317		0001071739		Centene Corporation	DE	UDP	Directors	rd of Directors		of Directors	l N	0
01200	Contono corporation		12 1100011			Exonarigo	Bankers Reserve Life Insurance			211001010	TO OF BITOCKOTO	1	Centene	1	
01295	Centene Corporation	71013	39-0993433				Company of Wisconsin	w ı	IA	Centene Corporation.	Ownership	100.0	Corporat ion	l N	0
01200	correction corporation		00 0000 100				l company or wroconom	1		Bankers Reserve Life	о штот оттр	1	l corporation		
							Health Plan Real Estate			Insurance Company of			Centene		
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	Wisconsin	Ownership	17.0	Corporation	v	0
0.1200	contone corporation		10 2000001				l l			11100010111	0 11101 0111 p	1	Centene		
01295	Centene Corporation	12315	20-3174593				Peach State Health Plan. Inc	GA	IA	Centene Corporation	Ownership	100.0	Corporation	l N	0
0.200	00.10.00	1.20 10	20 011 1000				Health Plan Real Estate				0 0 p		Centene		
01295	Centene Corporation	. 00000	46-2860967				Holding, Inc	MO	NIA	Peach State Health Plan, Inc	Ownership	21.0	Corporation	v	0
01200	ourtone corporation		10 2000001				Thorating, mo			Todon state nearth ran, me	0 11101 0111 p	1	Centene		
01295	Centene Corporation	. 15713	46-4829006				lowa Total Care, Inc	IA	IA	Centene Corporation	Ownership	100.0	Corporation	l N	0
0.200		1.01.10	10 1020000				Buckeye Community Health Plan,				0 0 p	1	Centene		
01295	Centene Corporation	11834	32-0045282				Inc	OH	IA	Centene Corporation.	Ownership.	100 0	Corporation	l N	0
0.200			02 00 10202				Health Plan Real Estate			Buckeye Community Health	0 0 p	1	Centene		
01295	Centene Corporation	00000	46-2860967				Holding, Inc.	MO	NIA	Plan. Inc	Ownership	13.0	Corporation	l yl	0
							[- · · · · · · · · · · · · · · · · · · ·		Centene		
01295	Centene Corporation	12959	20-5693998				Absolute Total Care, Inc	SC	IA	Centene Corporation	Ownership	100 0	Corporation	l N	0
0.200		12000	20 0000000				Health Plan Real Estate				0 0 p		Centene		
01295	Centene Corporation	. 00000	46-2860967				Holding, Inc.	MO	NIA	Absolute Total Care, Inc	Ownership.	1.0	Corporation	l yl	0
0.200							Coordinated Care Corporation				0 0 p	1	Centene		
01295	Centene Corporation	95831	39-1821211				d/b/a Managed Health Services	IN	IA	Centene Corporation	Ownership.	100.0	Corporat ion	l	0
							Health Plan Real Estate	1		Coordinated Care Corporation			Centene		
01295	Centene Corporation	. 00000	46-2860967				Holding, Inc.	MO	NIA	d/b/a Managed Health Services	Ownership	15.0	Corporation]Y	0
							Healthy Washington Holdings,						Centene		
01295	Centene Corporation	00000	46-5523218				Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	lN	0
	'						Coordinated Care of Washington,			Healthy Washington Holdings.	,		Centene		
01295	Centene Corporation	. 15352	46-2578279				Inc.	WA	I A	Inc	Ownership	100.0	Corporation	l	0
İ	'						Managed Health Services				'	İ	Centene	i i	
01295	Centene Corporation	96822	39-1678579				Insurance Corp	W I		Centene Corporation	Ownership	100.0	Corporation	lN	0
	· ·						Health Plan Real Estate			Managed Health Services	· ·		Centene		
01295	Centene Corporation	. 00000	46-2860967				Holding, Inc	MO	NIA	Insurance Corp	Ownership	2.0	Corporation	Y	0
	·										,		Centene		
01295	Centene Corporation	. 60078	86-0819817				Hallmark Life Insurance Co	AZ		Centene Corporation	Ownership	100.0	Corporation	N	0
	·									·	, i		Centene		
01295	Centene Corporation	. 95647	74-2770542				Superior HealthPlan, Inc	TX		Centene Corporation	Ownership	100.0	Corporation	N	0
	·						Health Plan Real Estate			·	· ·		Centene		
01295	Centene Corporation	. 00000	46-2860967	.			Holding, Inc	MO	NIA	Superior HealthPlan, Inc	Ownership	21.0	Corporation	[Y	0
	[1	Centene		İ
01295	Centene Corporation	. 00000	27-0916294	.			Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
							Louisiana Healthcare	1		Healthy Louisiana Holdings		1	Centene		l
01295	Centene Corporation	. 13970	27 - 1287287	.			Connections, Inc	LA	I A	LLC	Ownership	100.0	Corporation	N	0
													Centene		İ
01295	Centene Corporation	. 13923	20-8570212				Magnolia Health Plan Inc	MS	I A	Centene Corporation	Ownership	100.0	Corporation	[N	0
		[<u> </u>					l		1				Centene		1
01295	Centene Corporation	14053	27-2186150	.			IlliniCare Health Plan, Inc	IL	IA	Centene Corporation	Ownership	J100 . 0	Corporation	JN	0

													_		
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
_		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group	Consum Names	Company	ID Normalia a r	Federal	CIK	Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates Health Plan Real Estate	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s) Centene	(Y/N)	
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	IlliniCare Health Plan, Inc	Ownership	5.0	Corporation	Y	0
0.200									1		, o o		Centene		
01295	Centene Corporation	00000	26-0557093				Sunshine Health Holding LLC	FL	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
04005		10110	00 0007577									400.0	Centene	l	
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc. Kentucky Spirit Health Plan,	FL	I A	Sunshine Health Holding LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	14100	45-1294925				Inc	KY	IA	Centene Corporation	Ownership.	100.0	Corporation	l N	0
01200	' i	11100	10 120 1020						1	Contone corporation	. o		Centene		
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc	MO	NIA	Centene Corporation	Ownership	95.0	Corporation	N .	0
0.4005		4.40.40	45 0700044							Healthy Missouri Holding, Inc			Centene	l	
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc Health Plan Real Estate	MO	I A	(95%)	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NI A	Home State Health Plan, Inc	Ownership	5.0	Corporation	l √	٥
0 1200	ourtone corporation	00000	40 2000001				Sunflower State Health Plan,		1	Thomas otato mountment, mo	0 #1101 O111 P		Centene	' -	
01295	Centene Corporation	14345	45-3276702				Inc	KS	I A	Centene Corporation	Ownership	100.0	Corporation	N .	0
													Centene	l .l	
01295	Centene Corporation	14226	45-4792498				Granite State Health Plan, Inc	NH	I A	Centene Corporation	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	00000	46-0907261				California Health and Wellness	CA	N I A	Centene Corporation	Ownership	100.0	Centene Corporation	l N	٥
01233	centene corporation	00000	40-0307201						N 1 /	Centene corporation	. Owner sirrp	100.0	Centene	JN -	
01295	Centene Corporation	10769	30-0312489				Michigan Complete Health, Inc	MI	RE	Centene Corporation	Ownership	100.0	Corporat ion	lN .	0
							Western Sky Community Care,		l	<u> </u>	.		Centene		
01295	Centene Corporation	16351	45-5583511				Inc	NM	IA	Centene Corporation	Ownership	100.0	Corporation	N .	0
01295	Centene Corporation	16143	20-4761189				SilverSummit Healthplan, Inc	NV	IA	Centene Corporation	Ownership.	100.0	Centene Corporation	l N	٥
01233	Centene corporation	10 140	20-4701103				STIVETSUMMITE HEATTHPTAIT, THE	J\V	1	Centene corporation	. Owner sirrp	100.0	Centene	JV -	
01295	Centene Corporation	00000	20-0483299				Agate Resources, Inc	OR	NIA	Centene Corporation	Ownership	100.0	Corporation	l	0
İ	'						Trillium Community Health Plan,			·			Centene	i i	
01295	Centene Corporation	12559	42-1694349				Inc	OR	I A	Agate Resources, Inc	Ownership	100.0	Corporat ion	N .	0
01295	Centene Corporation	00000	26-4475075				Agate Properties, LLC	0R	NIA	Agate Resources, Inc.	Ownership	100.0	Centene Corporation	I "I	0
01233	Centene corporation	00000	20-44/ 30/ 3				Agate Troperties, LLo		NI/A	Agate Resources, The	. Owner sirrp	100.0	Centene	J\	
01295	Centene Corporation	15902	47 - 5123293				Nebraska Total Care, Inc	NE	IA	Centene Corporation	Ownership	100.0	Corporat ion	lN .	0
	·						Pennsylvania Health & Wellness,			· ·	,		Centene	i i	
01295	Centene Corporation	16041	47 - 5340613				Inc	PA	I A	Centene Corporation	Ownership	100.0	Corporat ion	N .	0
01295	Centene Corporation.	15912	47 - 5664832				Superior HealthPlan Community Solutions, Inc	TX	IA	Centene Corporation	Ownership.	100.0	Centene Corporation	I ,	0
01295	Contene corporation	13912	47 - 3004032				Sunshine Health Community	/ A	I A	Centene corporation	. Owner Sirrp	100.0	Centene	^{JN} -	
01295	Centene Corporation	15927	47 - 5667095				Solutions, Inc.	FL	I A	Centene Corporation	Ownership_	100.0	Corporation	l	0
	'						Buckeye Health Plan Community			'	'		Centene		
01295	Centene Corporation	16112	47-5664342				Solutions, Inc	DH	I A	Centene Corporation	Ownership	100.0	Corporation	N .	0
01295	Contono Cornoration	16130	81-1282251				Arkansas Health & Wellness Health Plan. Inc.	AR	IA	Contono Cornoration	Ownership.	100.0	Centene Corporation	, , ,	0
01290	Centene Corporation	10 130	01-1202231				Arkansas Total Care Holding	AR		Centene Corporation Arkansas Health & Wellness	. ownersurp	100.0	Centene	[
01295	Centene Corporation	00000	38-4042368				Company, LLC	DE	NIA	Health Plan, Inc.	Ownership.	49.0	Corporation	N	0
	'									Arkansas Total Care Holding			Centene		
01295	Centene Corporation	16256	82-2649097				Arkansas Total Care, Inc	AR	IA	Company, LLC	Ownership	100.0	Corporation]N .	0

16.2

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	_		-			Name of					Type of Control				
						Securities Exchange if			Relationship		(Ownership, Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent, Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide	Ultimate Controlling Entity(ies)/Person(s)	Required?	*
Code	Group Name	Code	Number	KSSD	CIK	international)	or Amiliates	Location	Entity	(Name of Entity/Person)	influence, Other)	Percentage	Centene	(Y/N)	
01295	Centene Corporation	00000	81-2788043				Healthy Oklahoma Holdings, Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N.	0
04205	Contone Corneration	00000	81-3121527				Oklahama Camplata Haalth Ing	0K	NIA	Healthy Oklahoma Holdings,	Ownorship	100.0	Centene		
01295	Centene Corporation	00000	01-3121521				Oklahoma Complete Health Inc	∪K	N I A	Inc	Ownership	100.0	Corporation Centene]	
01295	Centene Corporation	00000	20-4980875				Bridgeway Health Solutions, LLC.	DE	NIA	Centene Corporation	.Ownership	100.0	Corporation	N.	0
04005	0	00000	00 4000040				Bridgeway Health Solutions of		ALLA	Bridgeway Health Solutions,	O	400.0	Centene	,	
01295	Centene Corporation	00000	20-4980818				Arizona Inc	AZ	NIA	LLC	Ownership	100.0	Corporation Centene]N	
01295	Centene Corporation	00000	36-2979209				Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporat ion	N	0
04005	0	00700	00.0044040				0.14.			0.14.10	O	400.0	Centene	,	
01295	Centene Corporation	80799	. 06-0641618				Celtic Insurance Company	I L	I A	Celtic Group, Inc	.Ownership	100.0	Corporation Centene		
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc	MS		Celtic Insurance Company	Ownership	100.0	Corporation	N	0
04005	0	45700	00 4000000				Autotate of Book Otate Lo			0.14	O	400.0	Centene	,	
01295	Centene Corporation	15729	36-4802632				Ambetter of Peach State Inc	GA		Celtic Insurance Company	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	27-2221367				Novasys Health, Inc	DE	NIA	Celtic Group, Inc	Ownership	100.0	Corporation	N	0
	·						CeltiCare Health Plan Holdings			, ,	l'		Centene]	
01295	Centene Corporation	00000	26-4278205				LLC CeltiCare Health Plan of	DE	NIA	Celtic Group, Inc CeltiCare Health Plan	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	13632	26-4818440				Massachusetts, Inc.	MA	I A	Holdings LLC	Ownership	100.0	Corporat ion	N	0
	'										ļ'		Centene] .]	_ [
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene CorporationCentene Management Company	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	20-0057283				CMC Real Estate Co. LLC	DE.	NIA	LLC	Ownership	100.0		N	0
	·												Centene		_
01295	Centene Corporation	00000	. 26 - 4094682				Centene Center LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	82-1816153				Centene Center I. LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporat ion	N	0
	·		l							l			Centene		
01295	Centene Corporation	00000	47-5156015				Centene Center II, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	82-3210933				Centene Center III, LLC	DE.	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation	N	0
	'						, , , , , , , , , , , , , , , , , , , ,						Centene		
01295	Centene Corporation	00000	. 46 - 4234827				CMC Hanley, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	47-2914561				Forhan, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership.	100.0	Corporation	N	0
											'		Centene		
01295	Centene Corporation	00000	37 - 1766939				Hanley-Forsyth, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	45-5431787				GPT Acquisition LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation	l N	0
	'										'		Centene		
01295	Centene Corporation	00000	45-4372065				Clayton Property Investment LLC.	DE	NIA	GPT Acquisition LLC	.Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	46-2794037				LSM Holdco. Inc.	DE	NIA	Centene Corporation	Ownership.	100.0		N N	
	']	'	<u>'</u>		Centene		
01295	Centene Corporation	00000	46-2798132				Lifeshare Management Group, LLC.	NH	NIA	LSM Holdco, Inc	Ownership	100.0	Corporation	[N .	0

16.3

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	, ID	Federal	0114	Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	00000	38-4042368				Arkansas Total Care Holding Company, LLC	DE	NIA	Lifeshare Management Group,	Ownership	م م	Centene Corporation		0
01295	Centene Corporation	. 00000	30-4042300				Company, LLC	DE	NIA	LLC	. ownership	20.0	Centene	^{JN}	
01295	Centene Corporation	00000	20-2074217				CCTX Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0		l M	٥
01233	Contone corporation		20-2014211				l			Contone corporation	. O will Ci 3111 p	100.0	Centene		
01295	Centene Corporation	. 00000	74-2810404				Centene Company of Texas, LP	TX	NIA	CCTX Holdings, LLC	Ownership	1.0		l N	0
0 1200	Contone Corporation	00000	7 7 2010101				l deriterio demparty of Texas, Er			l corx nordings, EEs	1 0 milor on i p		Centene		
01295	Centene Corporation	00000	20-2074277				Centene Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0		N	0
	<u>'</u>									'	'		Centene		
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	TX	NIA	Centene Holdings, LLC	Ownership	99.0		N	0
													Centene		
01295	Centene Corporation	. 00000	43-1795436				MHS Travel & Charter, Inc	WI	NIA	Centene Corporation	.Ownership	100.0		N	0
04005		00000	40 4055400					DE				400.0	Centene	l	0
01295	Centene Corporation	. 00000	46-4855483				Health Care Enterprises, LLC	DE	NIA	Centene Corporation	.Ownership	100 . 0	Corporation	N	0
01295	Centene Corporation	00000	22-3889471				Envolve Holdings, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	N	0
01295	Centene corporation	. 00000	22-3009471				Cenpatico Behavioral Health,	DE	NIA	Certene corporation	. Owner Strip	100.0	Centene	IN	
01295	Centene Corporation	00000	68-0461584				III C	CA	NIA	Envolve Holdings, Inc	Ownership	100.0		l M	0
01233	l centene corporation		00-0401304				LLO			Cenpatico Behavioral Health.	. Owner Sirrp	100.0	Centene	IN	
01295	Centene Corporation	00000	86-0782736				CBHSP Arizona. Inc	AZ	NIA	IIIC	Ownership	100.0		l N	0
0.200			00 0.02.00				05.10. 7.1 120.10., 1110			Cenpatico Behavioral Health,			Centene		
01295	Centene Corporation	00000	47 - 2595704				Cenpatico of California, Inc	CA	NIA	LLC.	Ownership	100.0		N	0
İ	<u>'</u>	i i					Integrated Mental Health Mgmt,			Cenpatico Behavioral Health,	İ '		Centene	i i	
01295	Centene Corporation	. 00000	74-2892993				LLC.	TX	NIA	LLC	Ownership	100.0	Corporation	N	0
							Integrated Mental Health			Integrated Mental Health			Centene		
01295	Centene Corporation	. 00000	74-2785494				Services.	TX	NIA	Mgmt , LLC	Ownership	100.0		N	0
04005		00000	00 1001100				Cenpatico Behavioral Health of	. 7		Cenpatico Behavioral Health,		400.0	Centene	l	0
01295	Centene Corporation	. 00000	20 - 1624120				Arizona, LLC	AZ	NIA	Cenpatico Behavioral Health	Ownership	100.0	Corporation	N	Ω
01295	Centene Corporation	00000	80-0879942				Cenpatico of Arizona Inc	AZ	NIA	of Arizona, LLC	Ownership	80.0	Centene Corporation	l M	0
01295	l centene corporation	. 00000	00-00/9942				Cempatico di Arizona inc 	AZ	N I A	OI ALIZONA, LLG	. Owner Strip	00.0	Centene	IN	U
01295	Centene Corporation	00000	37 - 1788565				Envolve, Inc.	DE	NIA	Envolve Holdings, Inc.	Ownership	100.0	Corporation	l N	0
01200	l deritorio derperat ren	00000	01 1100000				AHA Administrative Services.			Liverve horarigs, me	. O WITTO T STITT P	100.0	Centene	'	
01295	Centene Corporation	00000	47-4545413				LLC	AL	NIA	Envolve, Inc	Ownership.	100.0		l N	0
													Centene		
01295	Centene Corporation	. 00000	47 - 3454898				Envolve - New York, Inc	NY	NIA	Envolve, Inc	Ownership	100.0	Corporation	N	0
							Community Care of Central						Centene		
01295	Centene Corporation	00000	82-2288767				Colorado, LLC	DE	NIA	Envolve, Inc	Ownership	100.0		N	0
0.4005										<u>.</u>			Centene	[<u>]</u>	_
01295	Centene Corporation	. 00000	06 - 1476380				Envolve PeopleCare, Inc	DE	NIA	Envolve Holdings, Inc.	Ownership	100 . 0	Corporation	N	0
04005	Contone Connection	00000	47 0540744					DE.	NI A	Favelue Beenle Communication	Ownersh'	400.0	Centene		^
01295	Centene Corporation	. 00000	47 - 2516714				LiveHealthier, Inc	DE	NIA	Envolve PeopleCare, Inc	Ownership	100.0		N	
01295	Centene Corporation	00000	61-1846191				Envolve Benefits Options, Inc	DE	NIA	Envolve Holdings, Inc.	Ownership	100.0	Centene Corporation	N	٥
01233	Contone Corporation		01-1040131				LINVOIVE DEHETTES OPETOHS, IIIC			Envolve Benefits Options.	. O#1161 9111 P	100.0	Centene	IN	
01295	Centene Corporation.	00000	20-4730341				Envolve Vision Benefits, Inc	DE	NIA	Inc.	Ownership	100 0	Corporat ion	N	n
0 1200	Toontono oorboration		EU TI UUUT I				Envoire Fieldi Donorito, Illo		4	I 1110	1 0 11101 0111 P	· · · · · · · · · · · · · · · · · · ·	001 por at 1011		

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									1 40		1 40	- 40	T		
1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
							Envolve Captive Insurance			Envolve Benefits Options,			Centene	l .l	
01295	Centene Corporation	. 00000	36-4520004				Company, Inc.	SC	NIA	Inc	Ownership	100.0		N	0
04005	Conton Connection	05202	75 0500450				Favelue Visies of Tayon Inc	TX		Envolve Benefits Options,	O	100.0	Centene	l ,,	0
01295	Centene Corporation	95302	75-2592153				Envolve Vision of Texas, Inc	I A	I A	Inc Envolve Benefits Options.	Ownership	100.0	Corporation Centene	^N	
01295	Centene Corporation	. 00000	20-4773088				Envolve Vision. Inc	DE	NIA	Inc.	.Ownership	100.0		l M	٥
01233	l	. 00000	20-4773000							Envolve Benefits Options,	. Owner sirrp	100.0	Centene	JN	
01295	Centene Corporation	00000	65-0094759				Envolve Vision of Florida. Inc	FL	NIA	Inc.	Ownership	100.0	Corporation	l N	0
	']	Envolve Benefits Options,			Centene		
01295	Centene Corporation	. 00000	20-4861241				Envolve Total Vision, Inc	DE	NIA	Inc	Ownership	100.0	Corporation	N	0
	·									Envolve Benefits Options,			Centene		
01295	Centene Corporation	. 00000	46-2783884				Envolve Dental, Inc	DE	NIA	Inc	Ownership	100.0		N	0
04005	040	00000	04 0000000				Forely Death of Florida Inc.	-	NII A	Franks Brokel Lan	Own a sala 'sa	400.0	Centene	l "l	0
01295	Centene Corporation	. 00000	81-2969330				Envolve Dental of Florida, Inc	FL	NIA	Envolve Dental, Inc	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	16106	81-2796896				Envolve Dental of Texas, Inc	TX	I A	Envolve Dental, Inc.	Ownership.	100.0	Corporation	l N	0
01233	l	. 10 100	01-2130030				Envolve Pharmacy Solutions,	I /\		Linvolve Deiltar, Mc	. Owner sirrp	100.0	Centene	J\	
01295	Centene Corporation	. 00000	77-0578529				Inc.	DE	NIA	Envolve Holdings, Inc	Ownership	100.0		l N	0
0.200	00110110 001 por at 1 0111111111111111111111111111111111		00.0020							Envolve Pharmacy Solutions,			Centene		
01295	Centene Corporation	. 00000	76-0511700				LBB Industries, Inc	TX	NIA	Inc.	Ownership	100.0		lN	0
	•									Envolve Pharmacy Solutions,	,		Centene		
01295	Centene Corporation	. 00000	75-2612875				RX Direct, Inc	TX	NIA	Inc	Ownership	100.0		N	0
04005	Conton Connection	00000	40 0007050				Francisco Dicember 104 110	NIV/		Envolve Pharmacy Solutions,	O	100.0	Centene	l ,,	
01295	Centene Corporation	. 00000	46-2307356				Envolve Pharmacy IPA, LLC	NY	NIA	Inc	Ownership	100.0	Corporation Centene	^N	
01295	Centene Corporation	00000	90-0636938				Casenet LLC	DE	NIA	Centene Corporation	Ownership	100.0		l N	0
01200	deritation deriper de l'on		00 0000000				00001101 220		1	Contono corporation	. o		Centene		
01295	Centene Corporation	. 00000					Casenet S.R.O.	CZE	NIA	Casenet LLC	Ownership	100.0		lN	0
	'	i i											Centene	l l	
01295	Centene Corporation	. 00000	61-1450727				Centurion Group, Inc	DE	NIA	Centene Corporation	.Ownership	100.0		N	0
04005	040	00000	00 0700500				0	DE	NII A	0	Own a sala 'sa	54.0	Centene	l "l	
01295	Centene Corporation	. 00000	90-0766502				Centurion LLC	DE	NIA	Centurion Group, Inc	.Ownership	51.0	Corporation Centene	N	U
01295	Centene Corporation	00000	81-4228054				Centurion of Arizona. LLC	A7	NIA	Centurion LLC	Ownership_	100.0		l M	٥
01200	Contone Corporation		01 4220004				Todital foil of Alfizona, Eco			CONTRACTOR ELG.	0 #1101 0111 p	100.0	Centene		
01295	Centene Corporation	00000	47 - 1686283				Centurion of Vermont, LLC	VT	NIA	Centurion LLC.	Ownership	100.0		l	0
İ	'	İ					ŕ				' '		Centene	i i	İ
01295	Centene Corporation	. 00000	47-2967381				Centurion of Mississippi, LLC	MS	NIA	Centurion LLC	Ownership	100.0	Corporation	N	0
04005			00 0750054					TN				400 0	Centene	ll	
01295	Centene Corporation	. 00000	30-0752651				Centurion of Tennessee, LLC	TN	NIA	Centurion LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	61-1696004				Massachusetts Partnership for Correctional Healthcare, LLC	MA	NIA	Centurion LLC	Ownership	100.0	Centene Corporation	l M	0
0 1230	Ochtene Corporation	. 00000	01-1000004							CONTROL LEG	041101 9111h	100.0	Centene	[IN]	
01295	Centene Corporation	. 00000	46-2717814				Centurion of Minnesota, LLC	MN	NIA	Centurion LLC	Ownership.	100.0	Corporation	lnl	0
	'	i i					Centurion Correctional				' '		Centene		
01295	Centene Corporation	. 00000	81-1161492				Healthcare of New Mexico, LLC	NM	NIA	Centurion LLC	Ownership	100.0	Corporation	N	0
	<u>.</u>						[, _		l		<u></u>		Centene		
01295	Centene Corporation	. 00000	81-0687470	.			Centurion of Florida, LLC	FL	NIA	Centurion LLC	Ownership	1100.0	Corporation	[N	0

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Names of Parent. Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence. Other)		Entity(ies)/Person(s)	(Y/N)	*
	'					,					,	Ĭ	Centene		
01295	Centene Corporation	00000	81-3007264				Centurion of Illinois, LLC	IL	NIA	Centurion LLC	Ownership	100.0	Corporation	N	0
04005	Contant Consenting	00000	04 4020020				Contunion of Manuford 11.0	MD	NII A	Cantunian IIIC	O	100 0	Centene		0
01295	Centene Corporation	00000	81-4938030				Centurion of Maryland, LLC	MD	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	N	l
01295	Centene Corporation	00000	81-5429405				Centurion of Philadelphia, LLC	PA	NIA	Centurion LLC	Ownership	100 0	Corporation	l N	0
0.1200	'						Centurion Detention Health						Centene		
01295	Centene Corporation	00000	82-4735175				Services, LLC	DE	NIA	Centurion LLC	Ownership	100.0	Corporation	N	0
04005	Contant Consenting	00000	82-4823469				Continuing of New Howards as 110	DE	NIA	Centurion LLC	O	100 0	Centene		0
01295	Centene Corporation		02-4023409				Centurion of New Hampshire, LLC.	УЕ	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	IN	
01295	Centene Corporation	00000	82-5316510				MHM Services. Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	l N	0
							, , , , , , , , , , , , , , , , , , , ,			İ '			Centene		
01295	Centene Corporation	00000	90-0766502				Centurion LLC	DE	NIA	MHM Services, Inc	.Ownership	49.0		N	0
01295	Contona Corneration	00000	E4 10EC240				 MHM Correctional Services. Inc	DE	NIA	MHM Services. Inc.	Ownership	100 0	Centene	, I	
01293	Centene Corporation		54-1856340	-			INDM Correctional Services, inc	Σ⊏	NIA	MINIM Services, Inc.	Ownership	100.0	Corporation Centene	IN	
01295	Centene Corporation	00000	20-2750269				MHM Maryland, Inc	MD	NIA	MHM Services, Inc	Ownership	100.0	Corporation	l N	0
	· ·										'		Centene		
01295	Centene Corporation	00000	56-2547206				MHM Ohio, Inc	OH	NIA	MHM Services, Inc	.Ownership	100.0		N	0
01295	Contona Corneration	00000	51-0620904				MHM Services of California,	CA	NIA	MHM Services, Inc	Ownership.	100.0	Centene Corporation	N N	0
01293	Centene Corporation		31-0020904				THE		NTA	I WILLIAM SELVICES, IIIC	. ownersinp	100.0	Centene	JJN	
01295	Centene Corporation.	00000	60-0002002				MHM Solutions, Inc.	DE	NIA	MHM Services, Inc	Ownership	100.0	Corporation	N	0
	·	l											Centene		_ [
01295	Centene Corporation	00000	26-1877007				Forensic Health Services, Inc	DE	NIA	MHM Services, Inc	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	46-1734817				MHM Health Professionals, Inc	DE	NIA	MHM Services. Inc	Ownership	100.0	Centene Corporation	l N	0
01293			40-1734017				Specialty Therapeutic Care		NIA	William Services, Inc	. Owner Sirip	100.0	Centene	JJN	
01295	Centene Corporation	00000	27-3617766				Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
	<u> </u>	l l					l			Specialty Therapeutic Care			Centene		_ [
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	TX	NIA	Holdings, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	73-1698807				Specialty Therapeutic Care, GP,	TX	NIA	Specialty Therapeutic Care	Ownership	100 0	Centene Corporation	l N	0
01200	deritation corporation								1	Specialty Therapeutic Care,	0 milor om p		Centene	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	TX	NIA	IGP. LLC	Ownership	0.0	Corporation	N	0
04005	0	00000	00 0004504				Specialty Therapeutic Care	TV	NII A	Specialty Therapeutic Care,	O	400 0	Centene	١., ١	
01295	Centene Corporation	00000	26-2624521				West, LLC	TX	NIA	Specialty Therapeutic Care	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	80-0856383				AcariaHealth Solutions, Inc	DE	NIA	Holdings, LLC	Ownership_	100.0	Corporation	l N	0
						·				Specialty Therapeutic Care			Centene		
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc	DE	NIA	Holdings, LLC	Ownership	100.0	Corporation	N	0
01205	Contana Corporation	00000	27 - 1599047				AccricHealth Pharmany #14 Iss	CA	NIA	AcariaHealth. Inc.	Ownership	100.0	Centene	N.	
01295	Centene Corporation	00000	21 - 1099041				AcariaHealth Pharmacy #14, Inc	bA	N I A	Moarranearth, THC	Ownership	100.0	Corporation Centene	N	U.
01295	Centene Corporation	00000	20-8192615	.]			AcariaHealth Pharmacy #11, Inc	TX	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N	0
											,		Centene		
01295	Centene Corporation	00000	27 - 2765424				AcariaHealth Pharmacy #12, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	[N	0

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	_		•		Ü	Name of	Ü		10		Type of Control	10		"	10
						Securities Exchange if			Relationship		(Ownership, Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0		N	0
01295	Centene Corporation	00000	13-4262384				AcariaHealth Pharmacy, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	l N	0
	,						,,]	i i			Centene		
01295	Centene Corporation		27-3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc	.Ownership	100.0	Corporation Centene	NN	0
01295	Centene Corporation	00000	20-8235695				New York Rx, Inc	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	20-0873587				Foundation Care, LLC	MO	NIA	AcariaHealth, Inc	Ownership	80.0	Corporation	N	0
01295	Centene Corporation	00000	27-0275614				U.S. Medical Management Holdings, Inc	DE	NIA	Centene Corporation	.Ownership	100.0	Centene Corporation	N	0
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	U.S. Medical Management Holdings, Inc.	Ownership	20.0	Centene Corporation	l N	0
	·						,				<u>'</u>		Centene	NI	
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Centene Corporation	.Ownership	80.0	Corporation Centene	N	0
01295	Centene Corporation	00000	31-1733889				RMED, LLC	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	47-2138680				IAH of Florida, LLC	FL	NIA	RMED, LLC	Ownership	100.0	Centene Corporation	N	0
01295	Centene Corporation	00000	51-0581762				Heritage Home Hospice, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	0
01295	Centene Corporation		20-2827613				Grace Hospice of Austin, LLC	MI		U.S. Medical Management, LLC	' '		Centene Corporation	N	0
	·						·				,		Centene	J	
01295	Centene Corporation	00000	20-1530070				ComfortBrook Hospice, LLC	OH	NIA	U.S. Medical Management, LLC	Ownership	100.0	CorporationCentene	N	0
01295	Centene Corporation	00000	20-4996551				Comfort Hospice of Texas, LLC Grace Hospice of San Antonio,	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	20-2827526				LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	45-0679248				Grace Hospice of Grand Rapids, LLC	M I	NIA	U.S. Medical Management, LLC.	Ownership.	100.0	Centene Corporation	N	0
01295	Centene Corporation	00000	45-0634905				Grace Hospice of Indiana. LLC	MI	NIA	U.S. Medical Management, LLC.	Ownershin	100.0	Centene Corporation	l N	0
											, , , , , , , , , , , , , , , , , , , ,		Centene		
01295	Centene Corporation	i i	45-5080637				Grace Hospice of Virginia, LLC Comfort Hospice of Missouri,	MI		U.S. Medical Management, LLC		100.0	Centene	N	
01295	Centene Corporation	00000	45-5080567				LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	46-1708834				Grace Hospice of Wisconsin, LLC.	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	81-5129923				Grace Hospice of Illinois, LLC	IL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Centene Corporation	N	
01295	Centene Corporation	00000	26-4435532				Seniorcorps Peninsula, LLC	VA	NIA	U.S. Medical Management, LLC	Ownership	100 0	Centene Corporation	N	۱
	'		33-1179031				'						Centene		
01295	Centene Corporation						R&C Healthcare, LLCPinnacle Senior Care of	TX		U.S. Medical Management, LLC			Corporation Centene	N	
01295	Centene Corporation	00000	46-0861469				Missouri, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	0

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to	5 6	Management,	Ownership		Filing	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent, Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide	Ultimate Controlling Entity(ies)/Person(s)	Required? (Y/N)	*
Code	Group Name	Code	Number	ROOD	OIIC	international)	Of Affiliates	Location	Littly	(Name of Entity/Ferson)	illiluerice, Other)	rercentage	Centene	(1/14)	
01295	Centene Corporation	00000	03-0556422				Country Style Health Care, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100 .0	Corporation	N	0
01295	Centene Corporation	00000	14-1878333				Phoenix Home Health Care, LLC Traditional Home Health	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	75-2635025				Services, LLC	ТХ	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene		0
01295	Centene Corporation		38-2751108				Family Nurse Care, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation		20-5108540				Family Nurse Care II, LLC	MI	NIA	U.S. Medical Management, LLC	'	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	20-3920947				Family Nurse Care of Ohio, LLC Pinnacle Senior Care of	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N .	0
01295	Centene Corporation	00000	46-4229858				Wisconsin, LLCPinnacle Senior Care of	WI	NIA	U.S. Medical Management, LLC	'		Corporation Centene	N .	0
01295	Centene Corporation	00000	81-1565426				Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	'	100 .0	Corporation Centene	N	0
	Centene Corporation		76-0713516				Pinnacle Home Care, LLC North Florida Health Services,	ТХ		U.S. Medical Management, LLC	·		Corporation Centene	N	0
01295	Centene Corporation		59-3519060				Inc Pinnacle Sr. Care of Kalamazoo,	FL	NIA	U.S. Medical Management, LLC	'		Corporation Centene	N	0
01295	Centene Corporation	00000	47 - 1742728				LLC	MI	NIA	U.S. Medical Management, LLC	'		Corporation Centene]N	0
	<u>'</u>		46-1734288				Hospice DME Company, LLC	MI	NIA	U.S. Medical Management, LLC	·		Corporation Centene	N .	0
01295	Centene Corporation		20-4364776				Rapid Respiratory Services, LLC USMM Accountable Care Network,	DE		U.S. Medical Management, LLC			Corporation Centene]N	
01295	Centene Corporation	00000	46-5730959 46-5735993				USMM Accountable Care Partners,	DE	NIA	U.S. Medical Management, LLC			Corporation Centene]N	0
01295	Centene Corporation		46-5745748				LLCUSMM Accountable Care Solutions, LLC.	DE DE	NIA NIA	U.S. Medical Management, LLC U.S. Medical Management, LLC	·		Corporation Centene Corporation]N	
01295	Centene Corporation	00000	45-4165480				USMM ACO. LLC	MI	NIA	U.S. Medical Management, LLC	,		Centene Corporation	N	
01295	,		45-4157180				USMM ACO Florida. LLC	M I	NIA	U.S. Medical Management, LLC	,		Centene Corporation	N N	0
01295	<u>'</u>	00000	45-4154905				USMM ACO North Texas, LLC	M I	NIA	U.S. Medical Management, LLC	,		Centene Corporation	N	0
01295	Centene Corporation	00000	47 - 5208076				Health Net. Inc.	DE	NIA	Centene Corporation	Ownership		Centene Corporation	N	0
01295	' '	00000	95-4402957				Health Net of California, Inc	CA.	NIA	'	Ownership		Centene Corporation	N	0
01295	'	66141	73-0654885				Health Net Life Insurance	CA.	I A	Health Net of California,	Ownership.		Centene Corporation	N	0
01295	Centene Corporation		98-0409907				Health Net Life Reinsurance Company	CYM.	NIA	Health Net of California, Inc.	Ownership.		Centene Corporation	N	0
01295	'		54-2174069				Health Net of California Real Estate Holdings, Inc	CA	NIA	Health Net of California, Inc	Ownership		Centene Corporation	N	0

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'	2		4	3	0	Name of	· ·	9	10		Type of Control	13	14		10
						Securities			L		(Ownership,				
		NAIG				Exchange if	Names of		Relationship		Board,	If Control is		Is an SCA	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N)	*
	'					,					, ,		Centene		
01295	Centene Corporation	00000	95-4117722				Managed Health Network, LLC	DE	NIA	Health Net, Inc.	Ownership	100.0		N	0
04005	0	00000	05 0047000				Managed Health Network	0.4	NII A	Managed Haalah National III O	O	400.0	Centene	l ,,	
01295	Centene Corporation	00000	95-3817988				Managed Health Network	CA	NIA	Managed Health Network, LLC	Ownersnip	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	95-4146179				MHN Services. LLC	CA	NIA	Managed Health Network, LLC	Ownershin	100.0		l N	0
0 1200			00 1110110				Health Net Federal Services.		1		, o iiii o ii o ii o		Centene		
01295	Centene Corporation	00000	68-0214809				LLC	DE	NIA	Health Net, Inc	Ownership	100.0	Corporation	N	0
0.4005			10 1000010					25		Health Net Federal Services,			Centene	ll	
01295	Centene Corporation	00000	42-1680916				MHN Government Services LLC	DE	NIA	LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	51-0589404				MHN Global Services. Inc	DE	NIA	MHN Government Services LLC	Ownership	100.0	Centene Corporation	l M	0
01200	Contene corporation	00000	31-0000404				MHN Government Services-			WINV COVERTIMENT CONVICES ELC	. O #1101 3111 p	100.0	Centene		
01295	Centene Corporation	00000	80-0852000				Belgium, Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0		N	0
<u>-</u>		l					MHN Government Services-			l	l		Centene	ll	
01295	Centene Corporation	00000	90-0889816				Djibouti, Inc MHN Government Services-	DE	NIA	MHN Government Services LLC	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	80-0852008				Germany, Inc	DE	N I A	MHN Government Services LLC	Ownerchin	100.0	Centene Corporation	l M	0
01293	Centene Corporation		00-0032000				MHN Government Services-Guam.	DL	NIA	I WILLIA GOVERNMENT SELVICES LLC	. Owner Sirrp	100.0	Centene	IN	
01295	Centene Corporation	00000	90-0889803				Inc	DE	NIA	MHN Government Services LLC	Ownership	100.0		lN	0
							MHN Government Services-				,		Centene	İ İ	
01295	Centene Corporation	00000	90-0889825				International, Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	80-0852019				MHN Government Services-Italy, Inc.	DE	NIA	MHN Government Services LLC	Ownerchin	100.0	Centene Corporation	l M	0
01293	Centene Corporation		00-0032019				MHN Government Services-Japan,	DL	NIA	Willing Government Services LLC	. Owner Sirip	100.0	Centene	JJN	
01295	Centene Corporation.	00000	46-1038058				Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0		N	0
	· ·						MHN Government Services-Puerto						Centene	l i	
01295	Centene Corporation	00000	90-0889815				Rico, Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0		N	0
01295	Centene Corporation	00000	90-0889824				MHN Government Services-Turkey,	DE	NIA	MHN Government Services LLC	Ownerchin	100.0	Centene Corporation	l M	0
01293	Centene Corporation		90-0009024				MHN Government Services-United	DL	NIA	Willing Government Services LLC	. Owner Sirrp	100.0	Centene]	υ
01295	Centene Corporation	00000	90-0889833				Kingdom, Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0		NN	0
	·												Centene		
01295	Centene Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	MHN Government Services LLC	Ownership	10.0		N	0
01295	Contona Corneration	00000	61-1388903				Health Net Preferred Providers,	DE	NIA	Health Net Federal Services,	Ownership	100.0	Centene Corporation	l ,	0
01295	Centene Corporation	. 00000	01-1300903				LLO	DE	NTA	Health Net Federal Services.	Ownership	100.0	Centene	IN	
01295	Centene Corporation	00000	35-2490375				Health Net Veterans. LLC	DE	NIA	LLC	Ownership	100.0	Corporation	l	0
	']	Health Net Federal Services,	· '		Centene		
01295	Centene Corporation	00000	88-0357895				Network Providers, LLC	DE	NIA	LLC	Ownership	90.0		N	0
01205	Contana Corneration	00000	06-1116976				Health Net of the Northeast,	DE	NI A	Notwork Provides 110	Ownersh:-	25.0	Centene		_
01295	Centene Corporation	00000	υυ - Η Η 109/ b				Health Net of the Northeast,	DE	NIA	Network Providers, LLC	Ownership	25.0	Corporation Centene	[N	υ
01295	Centene Corporation	00000	06-1116976				LLC	DE	NIA	Health Net. Inc.	Ownership.	75.0	Corporation	N	0
	']		<u>'</u>		Centene	'''	
01295	Centene Corporation	00000	84-1175468				QualMed, Inc	DE	NIA	Health Net, Inc	Ownership	100.0	Corporation	N	0
04005	Contana Connection	00000	04 0075005				QualMed Plans for Health of	00	NI A	Ove IMed Line	Own a nala '	400.0	Centene		
01295	Centene Corporation	00000	84-0975985				Colorado, Inc	CO	NIA	QualMed, Inc	Ownership	1100.0	Corporation	1N	U

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1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Ý/N)	*
							Health Net Health Plan of						Centene		
01295	Centene Corporation	95800	93-1004034				Oregon, Inc.	OR	IA	QualMed, Inc	Ownership	100.0	Corporation	N	0
0.4005							HSI Advantage Health Holdings,	25		l.,, ., .			Centene	ll	
01295	Centene Corporation	00000	23-2867299				Inc.	DE	NIA	Health Net, Inc.	Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	23-2867300				QualMed Plans for Health of Western Pennsylvania. Inc.	PA	NIA	HSI Advantage Health Holdings, Inc	Ownership	100 0	Centene Corporation		0
01293	l centene corporation		23-2007300				Pennsylvania Health Care Plan.	ГА	NTA	HSI Advantage Health	ownership	100.0	Centene	N	υ
01295	Centene Corporation	00000	25-1516632				Inc	PA	NIA	Holdings, Inc.	Ownership	100.0		l N	0
01200	deritaria derperatirari		20 1010002				1110		1	Thoramgs, mo.	0 #1101 0111 p	100.0	Centene		
01295	Centene Corporation	00000	94-3037822				Health Net Services Inc.	DE	NIA	Health Net, Inc.	Ownership	100.0	Corporation	l N	0
	<u>'</u>						Health Net Community Solutions,				'		Centene		
01295	Centene Corporation	00000	54-2174068				Inc	CA	NIA	Health Net, Inc	Ownership	100.0	Corporation	N	0
													Centene		
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona, Inc	AZ	I A	Health Net, Inc	.Ownership	100.0	Corporation	N	0
0.4005			54 0450400				Health Net One Payment	DE		L		400 0	Centene		
01295	Centene Corporation	00000	54-2153100	-			Services, Inc	DE	NIA	Health Net, Inc	.Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000					 Health Net of Pennsylvania, LLC.	PA	N I A	Health Net, Inc	.Ownership	100 0	Centene Corporation		0
01293	l centene corporation						QualMed Plans for Health of	F A	NTA	nearth Net, Inc	Owner Strip	100.0	Centene	IN	
01295	Centene Corporation	00000	23-2456130				Pennsylvania, Inc	PA	NIA	Health Net. Inc.	Ownership	100.0	Corporation	l N	0
01200	Contone corporation		20-2400100				I cilisyrvairia, mo	//	1	linearth Not, mo	. Owner strip	100.0	Centene		
01295	Centene Corporation	00000	68-0390434				FH Surgery Limited, Inc	CA	NIA	Health Net, Inc.	Ownership	100.0	Corporation	l	0
		i i					Foundation Health Facilities,						Centene		
01295	Centene Corporation	00000	68-0390438				Inc	CA	NIA	Health Net, Inc	Ownership	100.0	Corporation	N	0
													Centene		
01295	Centene Corporation	00000	98-0150604				FH Assurance Company	CYM	NIA	Health Net, Inc	Ownership	100.0	Corporation	N	0
0.4005			00 0005075				Health Net Pharmaceutical	0.4		L		400 0	Centene		
01295	Centene Corporation	00000	68-0295375				Services Health Net of Arizona	CA	NIA	Health Net, Inc	.Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000	86-0660443				Administrative Services. Inc	AZ	NIA	Health Net. Inc.	Ownership	100 0	Centene Corporation	l M	0
01233	Centene Corporation		00-0000443				Health Net Community Solutions	∧∠		l liearth Net, mc	. Owner sirrp	100.0	Centene	I	
01295	Centene Corporation	15895	81-1348826				of Arizona, Inc.	AZ	IA	Health Net. Inc.	Ownership	100 0	Corporation	l N	0
							, , , , , , , , , , , , , , , , , , , ,						Centene		
01295	Centene Corporation	00000	84-1301249				National Pharmacy Services Inc.	DE	NIA	Health Net, Inc.	Ownership	100.0	Corporation	N	0
							Integrated Pharmacy Systems,			National Pharmacy Services			Centene		
01295	Centene Corporation	00000	23-2789453				Inc	РА	NIA	Inc	Ownership	90.0	Corporation	N	0
0.4005			00 0000405				EU O	0.4		L		400 0	Centene		
01295	Centene Corporation	00000	68-0390435				FH Surgery Centers Inc.	CA	NIA	Health Net, Inc	.Ownership	100.0	Corporation	N	0
01295	Centene Corporation	00000	68-0343818				Greater Sacramento Surgery Center LP	CA	NIA	FH Surgery Centers Inc.	Ownership	66.0	Centene Corporation	l M	0
01230	l centene corporation		00-0343010	-			TOGILGI LF	UA	1NIA	The surgery centers inc	. owner surb		Centene	N	
01295	Centene Corporation	00000	46-2616037				Health Net Access. Inc	AZ	NIA	Health Net, Inc	Ownership	100.0		l N	ا ۱
0 1200	Ostrono oorporatron		10 2010001				MHS Consulting, International,		1	Thou the Not, Thou	. oor or rp		Centene		
01295	Centene Corporation	00000	20-8630006				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation]N	0
	'									MHS Consulting,	' '		Centene	"	
01295	Centene Corporation	00000					PRIMEROSALUD, S.L.	ESP	NIA	International, Inc	Ownership	100.0	Corporation	N	0
0.400-							MH Services International	0		MHS Consulting,			Centene	.	
01295	Centene Corporation	00000					Holdings (UK) Limited	GBR	NIA	International, Inc	Ownership	1100.0	Corporation	N	0

									•						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of					Type of Control				
						Securities Exchange if			Relationship		(Ownership, Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling		
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
							MH Services International (UK)			MH Services International			Centene		
01295	Centene Corporation	00000					Limited	GBR	NIA	Holdings (UK) Limited	Ownership	100.0	Corporation	. N .	0
01295	Centene Corporation	00000					Centene UK Ltd.	GBR	NIA	MH Services International (UK) Limited	Ownership	100.0	Centene Corporation	l M	0
01295	Cerrene Corporation	. 00000					Centene ok Ltd	UDN		IMH Services International	Ownership	100.0	Centene	.	
01295	Centene Corporation	00000					The Practice (Group) Limited	GBR	NIA	(UK) Limited	Ownership	100.0	Corporation	l N	0
0.200							Centene Health Plan Holdings.			(61)	· · · · · · · · · · · · · · · · · · ·		Centene	1	
01295	Centene Corporation	00000	82-1172163				Inc.	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
							Ambetter of North Carolina,			Centene Health Plan Holdings,			Centene	ll	
01295	Centene Corporation	16395	82-5032556				Inc.	NC	I A	Inc	Ownership	100.0	Corporat ion	. N .	0
01295	Centene Corporation	00000	82-2699483				Carolina Complete Health	DE	NIA	Centene Health Plan Holdings,	Ownership	90.0	Centene	I	
01293	Centene Corporation	. 00000	02-2099403				Holding Company Partnership	DE		Carolina Complete Health	Ownership	0.00	Corporation Centene		
01295	Centene Corporation	00000	82-2699332				Carolina Complete Health, Inc	NC	NIA	Holding Company Partnership	Ownership.	100.0	Corporation	l N	0
0.200	00.110.10		02 2000002				New York Quality Healthcare			The raring company ran the one pine			00. por at 10	1	
							Corporation f/k/a Centene						Centene		
01295	Centene Corporation	. 00000	82-3380290				Acquisition Corporation	NY	NIA	Centene Corporation	Ownership	100.0	Corporation	. N .	0
										New York Quality Healthcare			0 1		
04005	Contain Consortion	00000	55-0878053				Salus Administrative Services,	NY	NII A	Corporation f/k/a Centene	O	100.0	Centene	I	
01295	Centene Corporation	. 00000	55-08/8053				Inc	YV	NIA	Acquisition Corporation Salus Administrative	Ownership	100.0	Corporation Centene	.	
01295	Centene Corporation	00000	82-0802846				Salus IPA, LLC	NY	NIA	Services, Inc.	Ownership.	100.0	Corporation	l N	0
0 1200	00110110 001 por at 1011		02 0002010				Centene Company of New York.				0 11101 0111 p		Centene	1	
01295	Centene Corporation	00000	82-3385593				LLC	NY	NIA	Centene Corporation	Ownership	100.0	Corporation	N .	0
		l					.			<u> </u>	.		Centene	ll	
01295	Centene Corporation	00000	82-4670677				Calibrate Acquisition Co	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	. N .	0
01295	Contona Corneration	00000	47-4179393				Community Madical Haldings Corp.	DE	NIA	Calibrate Acquisition Co	Ownership	100.0	Centene	I	
01293	Centene Corporation	. 00000	47 -4179393				Community Medical Holdings Corp. Access Medical Acquisition.	DE	N I A	Community Medical Holdings	Ownership	100.0	Corporation Centene	.	
01295	Centene Corporation	00000	46-3485489				Inc.	DE	NIA	Corp.	Ownership.	100.0	Corporation	l N	0
0.200	00.110.10		10 0 100 100				Access Medical Group of North			Access Medical Acquisition,			Centene	1	
01295	Centene Corporation	00000	45-3191569				Miami Beach, Inc	FL	NIA	Inc	Ownership	100.0	Corporation		0
0.4005	<u> </u>		45 0404740				Access Medical Group of Miami,			Access Medical Acquisition,			Centene	1	
01295	Centene Corporation	. 00000	45-3191719				Inc	FL	NIA	Inc.	Ownership	100.0	Corporation	. N .	0
01295	Centene Corporation	00000	45-3192283				Access Medical Group of Hialeah. Inc	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	l M	0
01293	Centene Corporation	. 00000	43-3192203				Access Medical Group of		N I M	Access Medical Acquisition.	. Owner Sirrp	100.0	Centene	¹	
01295	Centene Corporation	00000	45-3199819				Westchester. Inc.	FL	NIA	Inc.	Ownership.	100.0	Corporation	l N	0
							Access Medical Group of Opa-]	Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	45-3505196				Locka, Inc.	FL	NIA	Inc	Ownership	100.0	Corporat ion	. N .	0
0.4005		00000	45 0400055				Access Medical Group of	Ę.		Access Medical Acquisition,		400 -	Centene	[.,	
01295	Centene Corporation	. 00000	45-3192955				Perrine, Inc	FL	NIA	Inc	Ownership	100.0	Corporation	. N .	
01295	Centene Corporation	00000	45-3192366				Access Medical Group of Florida	FI	NIA	Access Medical Acquisition,	Ownership	100.0	Centene Corporation	NI NI	١
0.1290			40°0 182000				Access Medical Group of Tampa,			Access Medical Acquisition,	0411619111h	100.0	Centene	·	
01295	Centene Corporation.	00000	82-1737078				Inc.	FL	NIA	Inc.	Ownership.	100.0	Corporation	l N	
							Access Medical Group of Tampa]	Access Medical Acquisition,	F		Centene		
01295	Centene Corporation	00000	82-1750978					FL	NIA	Inc	Ownership	100.0	Corporation		0

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of Securities					Type of Control				
						Exchange if			Relationship		(Ownership, Board.	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company		Federal	0114	Traded (U.S. or			Reporting		Attorney-in-Fact,	Provide			
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person) Access Medical Acquisition,	Influence, Other)	Percentage	Entity(ies)/Person(s) Centene	(Y/N)	
01295	Centene Corporation	00000	82-1773315				Access Medical Group of Tampa	FI	NIA	Inc.	Ownership	100 0	Corporation	l N	0
01200	Contone corporation						111, 1110			1110	. o iiii o i o i ii p		Centene		
01295	Centene Corporation	. 00000	82-4883921				Interpreta Holdings, Inc	DE	NIA	Centene Corporation	Ownership	80.1	Corporation	N	0
04005	Contant Consenting	00000	40 5547050				Internate Inc	חר	NILA	laterarete Heldines Inc	O	100.0	Centene	,	
01295	Centene Corporation	. 00000	46-5517858				Interpreta, Inc	DE	NIA	Interpreta Holdings, Inc	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	82-4581788				Patriots Holding Co	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	0
										·			Centene		
01295	Centene Corporation	00000					RxAdvance Corporation	DE	NIA	Patriots Holding Co	Ownership	27.8	Corporation	N	0
								-						l	

Asterisk	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	N0
Explanation:	
1. Business not written.	
Bar Code:	
1.	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate 2 Prior Year Ended Year To Date December 31 Book/adjusted carrying value, December 31 of prior year . Cost of acquired: 0 0 2.1 Actual cost at time of acquisition.....

2.2 Additional investment made after acquisition ... 0 ..0 Current year change in encumbrances.
Total gain (loss) on disposals..... 0 Deduct amounts received on disposals

Total foreign exchange change in book/adjusted carrying value. 5. 0 ..0 Deduct current year's other-than-temporary impairment recognized 0. 8. 9. 0 0.. 0 ..0 0 10. Deduct total nonadmitted amounts. Statement value at end of current period (Line 9 minus Line 10)

SCHEDULE B - VERIFICATION

	Mortgage Loans		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		0
İ	2.2 Additional investment made after acquisition		0
3.	Capitalized deferred interest and other.		0
4.	Accrual of discount.		0
5.	Capitalized deferred interest and other. Accrual of discount. Unrealized valuation increase (decrease). Total gain (loss) on disposals. Deduct amounts received on disposals.		0
6.	Total gain (loss) on disposals		0
7.			
8.	Deduct amortization of premium and mortgage interest points and commitment fees		0
9.	Deduct amortization of premium and mortgage interest points and commitment fees		0
10.	Deduct current year's other-than-temporary impairment recognized.		0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-		
	8+9-10)	0	0
12.	Total valuation allowance		0
13.	Subtotal (Line 11 plus Line 12)	0	0
14.	Deduct total nonadmitted amounts	0	0
15.	Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA - VERIFICATION

	Other Long-Term Invested Assets		
	-	1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		0
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		L0
4.	Accrual of discount.		0
5.	2.2 Additional investment made after acquisition Capitalized deferred interest and other. Accrual of discount. Unrealized valuation increase (decrease).		0
6.	Total gain (loss) on disposals		0
7.	Deduct amounts received on disposals.		0
8.	Deduct amortization of premium and depreciation		()
9.	Total foreign exchange change in book/adjusted carrying value		0
10.	Deduct current year's other-than-temporary impairment recognized		0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	L0	L0
12.	Deduct total nonadmitted amounts.	L0	L0
13.	Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D - VERIFICATION

	Bonds and Stocks		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,099,593	1,098,503
2.	Cost of bonds and stocks acquired	1,099,270	0
	Accrual of discount	514	1,091
4.	Unrealized valuation increase (decrease)		0
5.	Total gain (loss) on disposals		0
6.	Deduct consideration for bonds and stocks disposed of	L1 , 100 , 000	0
7.	Deduct amortization of premium		0
8.	Deduct amortization of premium		0
9.	Deduct current year's other-than-temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	1,099,377	1,099,593
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	1,099,377	1,099,593

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Michigan Complete Health, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	1,099,306			71	1,099,867	1,099,306	1,099,377	1,099,593
2. NAIC 2 (a)	0				0	0	0	0
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	1,099,306	0	0	71	1,099,867	1,099,306	1,099,377	1,099,593
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	1,099,306	0	0	71	1,099,867	1,099,306	1,099,377	1,099,593

(a) Book/Ad	usted Carrying Value column for the end of the current reporting perior	; NAIC 2 \$	
NAIC 3 \$; NAIC 4 \$; NAIC 5	; NAIC 6 \$	

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Part 2 - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Michigan Complete Health, Inc.

SCHEDULE E - PART 1 - CASH Month End Depository Balances

Month End Depository Balances										
1	2 3 4 5 Book Balance at End of Each Month During Current Quarter				9					
Depository	Code	Rate of	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6 First Month	7 Second Month	8			
Open Depositories	Code	Interest	Quarter	Date	FIIST MOUTH	Second Month	THIIG MOHUI			
D.O. Poy 1900 St. Doul								T		
US Bank	ļ	0.000				5,091,949				
Square One Bank		0.150			119,527	119,574	119,574	XXX		
0199998 Deposits in depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	XXX						XXX		
0199999 Total Open Depositories	XXX	ХХХ	0	0	1,486,372	5,211,523	1,586,686			
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0399999 Total Cash on Deposit	XXX	XXX	0	0	1,486,372	5,211,523	1,586,686			
0499999 Cash in Company's Office	XXX	ХХХ	XXX	XXX				XXX		
0599999 Total	XXX	XXX	0	0	1,486,372	5,211,523	1,586,686	XXX		

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Michigan Complete Health, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter										
1	2	3	4	5	6	7	8	9		
			Date	Rate of	Maturity	Book/Adjusted Carrying Value	Amount of Interest	Amount Received		
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year		
	2000		i				240 47 1001404	Daning Four		
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0000000 T-4-LO	and Facilitates		0							
8899999 Total C	asn Equivalents	0	0	0						